SUPPLEMENT

TO THE

BRITISH MEDICAL JOURNAL.

LONDON: SATURDAY, MAY 7TH, 1910.

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SPECIAL NOTICE TO MEMBERS.

Every member is requested to preserve this "Supplement," which contains matters specially referred to Divisions, until the subjects have been discussed by the Division to which he belongs. BY ORDER.

MATTERS REFERRED TO DIVISIONS.

PUBLIC MEDICAL SERVICES.

Model Rules issued by the Council of the Association for the consideration of the Divisions.

PART I.

OBJECT AND CONSTITUTION.

1. *Object.*—The Public Medical Service of is an Association of Medical practitioners constituted to organise the provision of medical attendance and medicine for persons unable to pay the ordinary medical charges in the usual manner.

2. *Members.*—Any duly registered medical practitioner practising in , or the neighbourhood, whose professional conduct is in conformity with the Rules for the time being in force of the Division of the British Medical Association, may become a Member of the Service upon signing an undertaking to abide by these Rules, provided that a practitioner who has not resided for six months in or the neighbourhood, shall not be eligible for membership unless he be the successor in practice or a partner of a Member.

Members may be Honorary or Acting. An "Acting" Member is one who undertakes the medical attendance of Subscribers to the Service upon the terms laid down in its Rules. An "Honorary" Member is a Member who has signed the undertaking to abide by these Rules but who does not undertake ordinary medical attendance in connection with the Service.

3. *Officers and Committee.*—The Officers of the Service shall be a Chairman, Vice-Chairman, Honorary Treasurer, and an Honorary Secretary, all of whom must be Members of the Service. The Officers, together with Members, representatives nominated by the local Division of the British Medical Association, and representatives nominated by the staffs of any allied hospitals (all of which representatives may or may not be Members of the Service), shall form the Committee of the Service. By the term "allied hospital" shall be understood a hospital which co-operates with the Service in the manner from time to time laid down in the Model Principles of Hospital Management approved by the British Medical Association.

Meetings.

4. *Annual General Meeting.*—An Ordinary General Meeting of the Members, called "the Annual Meeting," shall be held in of each year. At this Meeting the Officers and Members of the Committee, other than the representatives of the local Division of the British Medical Association and of any allied hospital shall be elected, the Honorary Secretary shall present the Report of the Committee, and the Honorary Treasurer shall present the accounts of the Service for the past year.

5. *Special Meeting.*—A Special General Meeting of the Members may be convened at any time by the Committee, and shall be convened by the Secretary on the requisition of Members.

6. *Quorum.*—At a General Meeting (ordinary or special) Members shall be a Quorum.

7. *Notice.*—Subject to the provision hereinafter contained for days' notice in the case of a proposed alteration of Rules, at least days' notice of every General Meeting and of the business thereof shall be given by the Secretary to all Members, but the accidental omission to give notice to any Member shall not invalidate the proceedings of a meeting. The notice of a General Meeting (and also a Member's requisition for a General Meeting) shall state the agenda thereat, and no matters not arising out of the agenda shall be dealt with at that meeting.

8. *Election of Officers.*—At each Annual General Meeting all the Officers and Members of Committee other than the outside representatives shall retire, but shall be eligible for re-election.

9. *Powers of Committee.*—The Committee may make rules for its meetings, and fix a quorum. Subject to such regulations not inconsistent with these Rules as may from time to time be prescribed by the Members in general meeting, the Committee shall deal with all such matters as the appointment of dispensers, clerks, collectors and auditors, the making of arrangements with chemists, and the leasing of premises (if any), and shall manage all the other affairs of the Service not required to be dealt with at a general meeting.

10. *Members not to accept Lower Rates.*—No Member shall take, or continue to treat, any *contract* patient *at a lower rate* than the subscriptions prescribed in these Rules.

No Member shall hold any appointment as Medical Officer to a club, or conduct any club of his own, except at a higher rate than the subscriptions prescribed in these Rules.

11. *Canvassing, Advertising and Collecting.*—No Member shall canvass or advertise for patients, and no canvassing or advertising shall be permitted by, or on behalf of, the Service, or any Member thereof.

No Member shall employ a Collector to collect subscriptions from contract patients at their homes, or be a Medical Officer to a society other than a Public Medical Service or Provident Dispensary approved by the local Division of the British Medical Association which employs such a Collector.

12. *Expulsion of Members.*—If any Member shall be found by the . . . . . Division of the British Medical Association guilty of violation of the Rules of the Division with reference to professional conduct, or of other conduct detrimental to the honour and interests of the profession, or calculated to bring the profession into disrepute, he shall, *ipso facto*, cease to be a Member of the Service. Further, if any Member shall wilfully commit any breach of these Rules (after having had his attention called to such breach by the Committee) he may be expelled from Membership by the vote of three-fourths of the Members present and voting at a general meeting.

13. *Alteration of Rules.*—These Rules shall not be altered except with the consent of two-thirds of the Members present and voting at a general meeting, provided also that days' notice of the terms of any proposed alteration of the Rules shall have been given in the agenda.

PART II.

SUBSCRIBERS.

14. *Admission.*—The following persons shall be eligible as Subscribers, and may be admitted by any Acting Member after medical examination :—

(*a*) Any single person whose earnings, inclusive of board, do not exceed shillings a week.

(*b*) Any married person, the earnings of whose family do not exceed shillings a week, with an extra allowance of shillings a week for each child wholly dependent upon him.

(*c*) The child of any such married person, not being under or over years of age.

(*d*) Subject to the approval of the Committee, any person not included in any of the foregoing classes whom an Acting Member may deem suitable.

If any Subscriber shall, in the opinion of the Committee, cease to be eligible, his name shall be removed from the list of Subscribers.

15. *Subscriptions.*—Subscriptions shall be paid in advance as follows :—

1. On admission a fee of for medical examination.
2. For persons over years, and under years at the time of admission a week, but in the case of families of four or more children not being under nor over years of age, three only shall be charged for, the other child or children being entered on the family card as a free beneficiary or beneficiaries.
3. For persons over years at the time of admission, subscriptions shall be at the higher rate of per week.
4. For persons actually suffering from illness at the time of admission, such special entrance fee, and such rate, as may in each case be approved by the Committee.

16. *Arrears.*—A Subscriber whose subscriptions are . . . . weeks or more in arrear, at least one week's notice in writing having been given him, shall be struck off the list of Subscribers, and shall not be re-admitted within one year of his being so struck off, except on payment of all arrears or such part thereof as may be approved by the Committee.

17. *Choice of Medical Attendant.*—A Subscriber shall, on admission, and at such other times as are provided by these Rules, choose his medical attendant from the Members of the Service who are willing to attend him, and shall for the time being be entitled to the services of such Member only.

The contract of the Subscriber shall be with his medical attendant only, and not with the Service or other Members of the Service.

Except by the consent of both Members concerned, the Subscriber shall not change his medical attendant more than once in a calendar year, giving at the least a month's notice terminating on the 31st December.

The Member in charge of a case may, on the ground of wilful disobedience or misconduct on the part of the Subscriber, refuse further attendance.

18. *Subscribers' Cards.*—Every Subscriber shall on admission be supplied with a card, which shall refer to these Rules, and on which shall be set forth such information, including the name and hours of the Subscriber's medical attendant, as may be approved by the Committee, provided that in the case of persons members of one family, and with one medical attendant, one card shall suffice (*see* Rule 15, 2). Failing production of the card, attendance may be refused.

19. *Privileges of Subscribers.*—A Subscriber in accordance with these Rules, shall be entitled to receive from his own medical attendant so long as his subscriptions are not in arrear :—

(i) Medical and surgical treatment at the (surgery of his medical attendant) *or* (dispensary of the Service) within the hours mentioned on his card.

(ii) When his condition requires, medical and surgical treatment at his place of dwelling, other than night calls and special visits as hereinafter defined.

(iii) All needful medicines and first dressings for wounds and other injuries.

Provided that a domestic servant shall not be entitled to claim attendance at her employer's house, but may do so at her own home if within the limits of the practice of her Medical Attendant.

20. *Limitation of Benefits.*—Subscribers shall not be entitled, in consideration of their ordinary subscriptions :—

(i) To medical service in respect of any of the following matters, except upon payment of the fees specified in the following Table :—

	£	s.	d.
(*a*) Confinements			
(*b*) Miscarriages			
(*c*) Vaccinations			
(*d*) Fractures			
(*e*) Dislocations			
(*f*) Consultations { Ordinary attendant			
(*f*) Consultations { Consultant			
(*g*) Administration of general or local Anæsthetics ... } general			
(*g*) Administration of general or local Anæsthetics ... } local ...			
(*h*) Night calls, *i.e.*, visits made between (8) p.m. and (8) a.m., in response to calls received within these hours			
(*i*) Special Visits, *i.e.*, visits made in response to, and on the same day as calls received after a.m., or made on Sundays by the Subscriber's desire...			
(*j*) Certificates			

(ii) To medical attendance in respect of illness arising from confinement or miscarriage within one month, operations requiring local or general anæsthesia, or operative dentistry, the fees for which shall be specially arranged ;

(iii) To medical service in respect of illness the consequence of personal misconduct;

(iv) To cod liver oil, linseed meal, leeches, serum, oxygen;

(v) To bottles, jars, dressings or bandages (except for first dressings).

PART III.

FINANCE AND MISCELLANEOUS PROVISIONS.

21. *Member's List of Subscribers.*—The Committee shall supply each Member of the Service with a List of Subscribers contracting with him and entitled to his services, and monthly with a list of additions and corrections.

22. *Payments.*—All payments made by a subscriber shall be the exclusive property of the Member who is his Medical Attendant at the time when such payment becomes due subject only to a rateable deduction for the expenses of collection and the general expenses of the Service.

23. *Former Members.*—The subscriptions collected for any former Member of the Service, and not already paid to him before the date of termination of his Membership, shall be paid to him as soon as conveniently may be, with the proper deduction of his share of the common expenses, and the subscribers whose Medical Attendant he was shall have the right to choose as Medical Attendant any other Member who is willing to attend.

24. *Money collected.*—All moneys collected shall be paid into a Bank, to the credit of the Treasurer.

25. *Distribution of Subscriptions.*—The Treasurer shall, on the usual quarter days, after payment of, and provision for, all current expenses, distribute the balance of the moneys collected to the Members entitled thereto.

26. *Sale of Member's Interest.*—A Member may sell to any person qualified for Membership his interest in the Service as part of his practice, and in connection with a sale of that practice, but not otherwise. The purchaser of a Member's interest shall become entitled thereto upon becoming a Member of the Service.

27. *Collectors.*—Collectors shall be paid by salary and not by commission.

28. *Interpretation.*—In these Rules, where the context does not forbid, words importing the masculine gender shall include the feminine, and words in the singular shall include the plural, and *vice versâ*.

BRITISH MEDICAL ASSOCIATION LIBRARY.

BOOKS NEEDED TO COMPLETE SERIES.

THE Librarian will be glad to receive any of the following volumes, which are needed to complete series in the Library:

American Climatological Transactions. Vols. 1, 4, 5, 6.
——— Dermatological Association Transactions. Vols. 5, 7, 8, 11, and 29.
——— Journal of the Medical Sciences. New series, vols. 4, 5, 1842–3; vols. 14, 15, 1847–8; vols. 18–30, 1850; vol. 33, 1857; vol. 46, 1864–5; vol. 59; or any parts of these vols.
——— Journal of Ophthalmology. Vols. 1–9.
——— Laryngological Association. Transactions. Vols. 1–6, 8–9.
——— Medical Association. Transactions, 2, 4, 6, 7, 11, 12, 14, 15, 16, 19, 20, 22, 31, after vol. 33, and the *Journal*.
——— Otological Society. Transactions. Vol. 3, part 2, 1883.
——— Public Health Association. Transactions. Any vols.
Analyst. Vols. 1–24.
Annals of Surgery. Vols. 13, 14, 26, 27.
Journal of Laryngology. Vols. 1 to 9.
Montreal Medical Journal, prior to 1900.
New York State Journal of Medicine, 1906.
Ophthalmic Review. January, 1882.
Pediatrics, prior to 1902.
Provincial Medical and Surgical Journal. March to September, 1841, and May 11th, 1852.
Recueil d'ophtalmologie, prior to 1893.
Revue générale d'ophtalmalogie, prior to 1893.
St. Bartholomew's Hospital Gazette. Vols. 1–6.
St. George's Hospital Gazette. Vols. 1–7.
St. Mary's Hospital Gazette. Vols. 1–5.
Sei-i-kwai Medical Journal. Vols. 1–11.
Semaine Médicale, prior to 1884. Titles for 1884 and 1892.
South African Medical Journal. February, April, 1895. Titles, Vols. 3 and 4.
United States Department of Agriculture, Bureau of Animal Industry. Reports 1–7 10–14.

☞ *To ensure the insertion of notices in this column, they must be received at the Central Offices of the Association not later than the first post on Tuesday.*

Association Notices.

ANNUAL GENERAL MEETING.

Notice is hereby given that the 1910 Annual General Meeting of the British Medical Association will be held in the Court of Common Council Chamber, Guildhall, London, on Friday July 22nd, 1910, at Ten a m.

[*This Meeting is to comply with Article XII, and will adjourn forthwith until Tuesday, July 28th, at 2.30 o'clock.*]

ANNUAL REPRESENTATIVE MEETING.

Also, notice is hereby given that the 1910 Annual Representative Meeting will be held in the Court of Common Council Chamber, Guildhall, London, on Friday, July 22nd, 1910 (and following days as required), immediately after the Annual General Meeting, fixed for Ten a.m., on Friday, July 22nd.

BY ORDER OF THE COUNCIL,

GUY ELLISTON,

Financial Secretary and Business Manager.

April, 1910.

ELECTION OF CENTRAL COUNCIL 1910-11.

NOTICE is hereby given that nominations of candidates for election of Members of Council by Branches or groups of Branches in the United Kingdom by voting papers for the year 1910-11 must be forwarded to reach the Financial Secretary and Business Manager, at the Office of the Association, not later than Monday, May 23rd, 1910, and that each nomination must be on the prescribed form, copies of which will be furnished by the Financial Secretary and Business Manager upon application.

Separate forms have been prepared for a nomination by a Division and for a nomination by any three Members respectively, and those applying are requested to state for which purpose the form is desired.

Voting papers containing the names of all candidates duly nominated will be issued from the Central Office on Saturday, June 11th, and will be returnable not later than Saturday, June 18th.

By Order of the Council,

GUY ELLISTON,

Financial Secretary and Business Manager.

April 28th.

NOTICE OF CHANGES OF BOUNDARIES OF DIVISIONS AND BRANCHES.

Norwood Division: Greenwich Division.

THE following change has been made in accordance with the Regulations of the Association, and takes effect from the date of publication of this notice:

That the Norwood Division of the Metropolitan Counties Branch be divided into two parts: One part, to consist of Norwood, Dulwich, Sydenham, Forest Hill, Penge, and Anerley, to be known as the Norwood Division; the other part, to consist of Blackheath, Lee, Lewisham, Catford, Deptford, and Greenwich, to be known as the Greenwich Division.

BRANCH AND DIVISION MEETINGS TO BE HELD

ABERDEEN BRANCH.—*Election of Representative of the Branch on the Council of the Association.*—Nominations for the above office should be sent to the Honorary Secretary of the Branch, T. FRASER, 45, Elmbank Terrace, Aberdeen, before May 16th.

BATH AND BRISTOL BRANCH: BATH DIVISION.—The annual meeting of the Bath Division will be held at the Royal United Hospital, Bath, on Friday, May 20th, at 5.30 p.m. Business: (1) Election of Officers. (2) Election of a Representative for the Annual Meeting in London. (3) Any other business.—D. LESLIE BEATH, Honorary Secretary.

BATH AND BRISTOL BRANCH: BRISTOL DIVISION.—The annual meeting of this Division will be held at University College, Bristol, in the Medical Library, at 5.30 p.m., on Monday, May 23rd. Business: Election of officers and other business.—NEWMAN NEILD, Honorary Secretary.

BIRMINGHAM BRANCH.—The annual meeting of this Branch will be held on Thursday, June 2nd, at 4 p.m., at the Medical Institute, Edmund Street. Nominations of officers must be sent to Albert Lucas, 9, Easy Row, not later than May 19th. Professor Gilbert Barling will give the presidential address.—ALBERT LUCAS, J. FURNEAUX JORDAN, Honorary Secretaries.

DORSET AND WEST HANTS BRANCH.—The spring meeting of this Branch will be held in the Hotel Mont Doré, Bournemouth, on Wednesday, May 18th.—JAMES DAVISON, Honorary Secretary, "Streateplace," Bournemouth.

DORSET AND WEST HANTS BRANCH: BOURNEMOUTH DIVISION.—The annual meeting of the Division will be held on Saturday, May 14th. Business: Election of officers and other business.—E. KAYE LE FLEMING, Honorary Secretary.

GLOUCESTERSHIRE BRANCH.—The annual meeting of this Branch will be held at Stroud on Thursday, May 19th.—D. E. FINLAY, Honorary Secretary, Gloucester.

LANCASHIRE AND CHESHIRE BRANCH: ROCHDALE DIVISION.—A joint meeting of this Division and the Rochdale and District Medical Society will be held in the Wellington Hotel, Drake Street, Rochdale, on Thursday, May 12th, at 8.30 p.m., when an address will be delivered by Dr. Taylor of Salford, a member of the Central Council of the British Medical Association, on Poor Law Reform, with special reference to the establishment of a State Medical Service. The extreme importance and urgency of this matter renders it desirable that every member of both societies should make a point of being present at this meeting.—JAMES MELVIN, Newbold Hall, Rochdale; J. CUTHBERTSON WALKER, Waithlands, Rochdale.

METROPOLITAN COUNTIES BRANCH: WALTHAMSTOW DIVISION.—A general meeting of medical practitioners residing within the area of the Walthamstow Division will be held on Tuesday, May 10th, at 4 p.m., in the Lecture Hall of the Wesleyan Church School at the corner of James Lane, High Road, Leyton. Business: To consider the promotion of a medical service for school children. Sir Victor Horsley will address the meeting. All medical practitioners will be welcomed. The nearest station is the Midland.

MIDLAND BRANCH: LINCOLN DIVISION.—The annual meeting of this Division will be held in the Guildhall, Lincoln, on Thursday, May 19th, at 3.30 p.m. Agenda: (*a*) To elect officers, the Representative on the Branch Council, and the ordinary members of the Executive Committee. (*b*) Consideration of the interim report of the Special Poor Law Reform Committee and the answering of certain questions relative thereto (see SUPPLEMENT, BRITISH MEDICAL JOURNAL, February 5th, 1910). (*c*) Consideration of the report of the Council on the Relation of Homoeopaths to the Association and the answering of certain questions relative thereto (see SUPPLEMENT, BRITISH MEDICAL JOURNAL, February 12th, 1910). (*d*) To decide whether the Division should initiate any subject for discussion at the Annual Meeting of the Association, or enter into preliminary discussion of any subject to be brought forward at that meeting. (*e*) Other business. Any member desiring to read papers or show cases or specimens is requested to communicate with J. S. CHATER, Honorary Secretary, 10, Steep Hill, Lincoln.

NORTH LANCASHIRE AND SOUTH WESTMORLAND BRANCH: FURNESS DIVISION.—The annual meeting will be held on Friday, May 27th, at 3.15 p.m., in the Masonic Club, Barrow. Business: (1) Annual report. (2) Election of office-bearers. (3) Dr. Pooley will propose this resolution: "In all cases in which a partner, after introduction or otherwise, sells his practice to a successor, all clubs shall be taken over by the successor at 4s. 4d. per head per annum; and all members of this Division agree not to take any such clubs within twelve months of transference." (4) The following resolution, submitted by the Chelsea Division: "That this meeting recognizes the necessity for a Union of Medical Practitioners with Parliamentary Representation, and requests the Executive of the British Medical Association to ascertain the wishes of members in the United Kingdom by referendum at the earliest possible date." (5) Dr. Williams: Case of Locomotor Ataxy. (6) Dr. Harper will open a discussion on the Use and Abuse of Midwifery Forceps. (7) Dr. J. A. Reed: Notes of a Case of Inversion of the Uterus. Any other business. As the Committee is anxious to make this chiefly a clinical meeting, will all members who can show cases or specimens kindly communicate with the Secretary?—JOHN LIVINGSTON, Honorary Secretary.

SOUTH-EASTERN BRANCH: BROMLEY DIVISION.—A meeting of this Division will be held at the Bell Hotel, Bromley, on Thursday, May 12th, at 8.30 p.m. Agenda: (1) Minutes of last meeting. (2) Discussion *re* Branch meeting, 1911. (3) Communication from Metropolitan Counties Branch. (4) Communication from Chelsea Division. (5) Other business.—A. TENNYSON SMITH, Honorary Secretary.

ULSTER BRANCH.—The annual meeting of this Branch will be held in Belfast on Thursday, June 2nd. Members having communications to make to the meeting are requested to send particulars of the same to the Honorary Secretary not later than May 21st. Nominations for the posts of President, Treasurer, and Secretary, each signed by two members, should be sent not later than May 12th to CECIL SHAW, M.D., Honorary Secretary, 29, University Square, Belfast.

British Medical Association.

SCHOLARSHIPS AND GRANTS IN AID OF SCIENTIFIC RESEARCH.

SCHOLARSHIPS.

THE Council of the British Medical Association is prepared to receive applications for Research Scholarships as follows:

1. An ERNEST HART MEMORIAL SCHOLARSHIP, of the value of £200 per annum, for the study of some subject in the department of State Medicine.
2. THREE RESEARCH SCHOLARSHIPS, each of the value of £150 per annum, for research into some subject relating to the Causation, Prevention, or Treatment of Disease. Each Scholarship is tenable for one year, commencing on October 1st, 1910. A Scholar may be reappointed for not more than two additional terms.

The conditions of the award of Scholarships are stated in the Regulations, a copy of which will be supplied on application to the Medical Secretary of the Association, 429, Strand, London, W.C.

GRANTS.

The Council of the British Medical Association is also prepared to receive applications for Grants for the Assistance of Research into the causation, treatment, or prevention of disease. Preference will be given, other things being equal, to members of the medical profession, and to applicants who propose as subjects of investigation problems directly related to practical medicine.

The conditions of the award of Grants are stated in the Regulations, a copy of which will be supplied on application to the Medical Secretary of the Association, 429, Strand, London, W.C.

Applications.

Applications for Scholarships and Grants for the year 1910–11 must be made not later than June 20th, 1910, in the prescribed form, a copy of which will be supplied by the Medical Secretary on application.

Each application should be accompanied by testimonials, including a recommendation from the head of the laboratory, if any, in which the applicant proposes to work, setting out the fitness of the candidate to conduct such work, and the probable value of the work to be undertaken. This is not intended, however, to prevent applications for grants in aid of work which need not be performed in a recognized laboratory.

J. SMITH WHITAKER, *Medical Secretary.*

429, Strand, London, W.C.,
April 20th, 1910.

COUNCIL REPORT.

[APPENDIX.]

ATTENDANCES OF COUNCIL, COMMITTEES, AND SUBCOMMITTEES FOR 1909-10.

The following Return of Attendances at Meetings of Council, Committees, and Subcommittees is published in accordance with the provisions of Standing Order 14.

COUNCIL.

Members of Council.	July 27, 1909.	July 28, 1909	July 29, 1909.	Oct. 27, 1909.	Jan. 26, 1910	April 27, 1910.	Total.
OWEN, Mr. EDMUND, London (Chairman) ...	1	1	1	1	1	1	6
Whitla, Sir Wm., Belfast (President)	1	—	—	—	1	—	2
Butlin, Mr., London (President-elect)	—	—	—	1	1	1	3
White, Dr. Sinclair, Sheffield (Past President) ...	1	1	1	1	1	1	6
Ballance, Mr H. A., Norwich (Chairman of Representative Meetings)	1	1	1	1	1	1	6
Rayner, Dr. Edwin, Stockport (Treasurer) ...	1	1	1	1	1	1	6
Anderson, Dr. J. Ford, London	1	1	1	1	1	1	6
Andrew, Dr. J. Grant, Glasgow	1	1	1	1	1	1	6
Bentham, Inspector-General R., R.N., London ...	—	1	1	1	1	1	5
Branfoot, Surgeon-General A. M., C.I.E. Hemel Hempstead	—	—	—	—	—	—	—
Buist, Dr. R. C., Dundee	—	1	1	1	1	—	4
Carline, Dr. W. A., Lincoln	1	1	—	1	1	1	5
Clark, Mr. Andrew, London	—	1	1	1	1	1	5
Corby, Professor H., Cork	1	1	1	—	1	—	4
Cousins, Mr. J. Ward, Southsea	1	1	1	—	—	1	4
Cureton, Dr. Edward, Shrewsbury	—	—	—	—	1	1	2
Davison, Dr. Jas., Bournemouth	1	1	1	1	1	1	6
Domville, Mr. E. J., Exeter	1	1	1	1	1	1	6
Drew, Mr. A. J., Oxford...	1	1	—	1	1	1	5
Eales, Mr. G. Young, Torquay	—	—	—	1	—	1	2
Edmond, Dr. George, Aberdeen...	—	—	—	1	—	1	2
Ewart, Dr. David, Chichester	—	—	—	1	1	1	3
Ewart, Mr. J. H., Eastbourne	1	1	1	1	1	1	6
Farquharson, Dr. A. C., Bishop Auckland ...	1	1	1	1	1	1	6
Flemming, Mr. C. E. S., Bradford-on-Avon ...	—	—	—	1	1	1	3
Francis, Dr. H. A., London	—	—	—	1	—	1	2
Garstang, Mr. T. W. H., Altrincham	1	1	—	1	1	1	5
Goyder, Dr. D., Bradford	1	1	1	1	1	1	6
Greenlees, Dr. T. D., London	1	1	1	1	1	1	6
Hall, Dr. Wm., Lancaster	—	—	—	1	—	1	2
Haslip, Dr. G. E., London	—	—	—	1	1	1	3
Horsley, Sir Victor, F.R.S., London	1	1	—	1	1	1	5
Johnston, Dr. R. McKenzie, Edinburgh ...	—	—	—	1	1	1	3
Johnstone, Mr. R. J., Belfast	1	1	—	—	1	1	4
Jones, Mr. Herbert, Hereford	1	1	1	1	1	1	6
Joubert de la Ferté, Col. C. H., I.M.S., Weybridge	1	1	—	1	1	—	4
Ker, Mr. Hugh R., London	1	1	1	1	1	1	6
Kinsey, Mr. R. H., Bedford	1	1	1	1	1	1	6
Larkin, Mr. F. C., Liverpool	1	1	1	1	1	1	6
Lucas, Mr. Albert, Birmingham	1	1	—	1	1	1	5
Macdonald, Dr. J. A., Taunton	1	1	1	1	1	1	6
Macfie, Dr. Chas., Bolton	1	1	1	1	1	1	6
Mackintosh, Dr. D. J., M.V.O., Glasgow ...	—	1	1	1	1	1	5
Maclean, Dr. E. J., Cardiff	—	—	1	1	1	1	4
Manley, Dr. Herbert, West Bromwich	1	1	1	1	1	1	6
Martin, Dr. C. J., F.R.S., London	—	—	—	1	1	1	3
Mason, Dr. J. M., London...	—	—	—	1	1	1	3
Milburn, Dr. C. H., Hull	—	—	—	—	—	1	1
Moir, Dr. J. Munro, Inverness	1	1	1	1	—	1	5
Morier, Dr. C. G. D., London	—	—	—	1	1	1	3
Nasmyth, Dr. T. G., Edinburgh	1	1	—	1	—	1	4
Nicholson, Dr. B. H., Colchester	1	1	—	1	1	1	5
Pope, Dr. F. M., Leicester	—	1	—	1	1	1	4
Reid, Dr. T. Whitehead, Canterbury (dead) ...	1	1	1	1	1	—	5
Roberts, Dr. H. Jones, Penygroes	—	—	—	1	1	1	3
St. John, Mr. W. St. A., Derby	1	—	1	1	1	1	5
Shaw, Dr. Cecil E., Belfast	1	1	1	1	—	1	5
Shaw, Dr. Lauriston E., London	1	1	1	1	1	1	6
Simpson, Lieut.-Col. R. J. S., C.M.G., London ...	—	—	—	1	1	1	3
Stevens, Dr. W. Mitchell, Cardiff	1	1	1	1	1	1	6
Straton, Mr. C. R., Wilton	1	1	1	1	1	1	6
Syme, Mr. G. A. (Melbourne and Victoria Branch)	—	1	1	1	—	—	3
Taylor, Dr. J. H., Salford	1	1	1	1	1	1	6
Todd, Dr. D. F., Sunderland	1	1	1	1	—	1	5
Trotter, Dr. A., Perth	1	1	1	1	1	1	6
Twynam, Dr. G. E., London	—	—	—	—	—	—	—
Verrall, Mr. T. Jenner, Bath	1	1	1	—	1	1	5
Walshe, Dr. D., Graigue	1	1	1	—	—	—	3
White, Professor A. H., Dublin	—	1	1	1	—	1	4
Williams, Mr. D. J., Llanelly	1	1	1	1	1	1	6
Wilson, Lieutenant-Colonel E. M., C.B., C.M.G., Farnborough	1	—	1	1	1	1	5

ARRANGEMENTS COMMITTEE.

Members of Committee.	Oct. 15, 1909.	Nov. 6, 1909.	Nov. 17, 1909.	Total.
CHAIRMAN OF COUNCIL (Chairman)	—	1	1	2
President (*ex officio*)	—	—	1	1
Chairman of Representative Meetings (*ex officio*) ...	—	1	1	2
Treasurer (*ex officio*)	—	1	1	2
Andrew, Dr. J. Grant, Glasgow	—	—	1	1
Drew, Mr. A. J., Oxford	—	1	1	2
Hall, Dr. Wm., Lancaster	—	1	—	1
Lucas, Mr. Albert, Birmingham	—	1	1	2
Nicholson, Dr. B. H., Colchester	—	—	—	—
Shaw, Dr. Cecil E., Belfast	—	1	—	1
Local Representatives:				
President-elect	1	—	1	2
Anderson, Dr. J. Ford, London	1	—	1	2
Clark, Mr. Andrew, London	1	—	1	2
Ker, Mr Hugh R., London	1	—	1	2
Robinson, Mr. Betham, London	1	—	1	2
Shaw, Dr. Lauriston E., London	1	—	1	2

CENTRAL ETHICAL COMMITTEE.

Members of Committee.	Oct. 8, 1909.	Jan. 7, 1910.	Jan. 12, 1910.	April 8, 1910.	Total.
MACLEAN, Dr. E. J., Cardiff (Chairman)	1	1	1	1	4
President (*ex officio*)	—	—	—	—	—
Chairman of Representative Meetings (*ex officio*) ...	—	1	—	—	1
Chairman of Council (*ex officio*)	1	—	—	—	1
Treasurer (*ex officio*)	—	—	1	1	2
Bateman, Dr. A. G., London	1	1	1	1	4
Ewart, Mr. J. H., Eastbourne	1	1	1	1	4
Goff, Dr. Bruce, Bothwell, N.B.	1	1	—	1	3
Kinsey, Mr. R. H., Bedford	1	1	1	1	4
Langdon-Down, Dr. R. L., Hampton Wick	1	1	1	1	4
Lee, Dr. Philip G., Cork	1	1	—	1	3
Milburn, Dr. C. H., Hull	1	—	—	1	2
Shaw, Dr. Lauriston E., London	1	1	1	1	4
Straton, Mr. C. R., Wilton	1	1	1	1	4

STANDING ETHICAL SUBCOMMITTEE.

Members of Committee.	Nov. 1, 1909.	Nov. 29, 1909.	Dec 20, 1909.	Feb. 7, 1910.	March 7, 1910.	March 21, 1910.	Total.
CHAIRMAN OF CENTRAL ETHICAL COMMITTEE (Chairman)	1	1	1	1	1	1	6
Bateman, Dr. A. G., London	1	1	1	1	1	1	6
Kinsey, Mr. R. H., Bedford	1	1	1	1	1	1	6
Langdon-Down, Dr. R., Hampton Wick	1	1	1	1	1	1	6
Owen, Mr. Edmund, London	—	—	—	—	1	—	1
Shaw, Dr. Lauriston E., London	1	1	1	1	1	1	6

ETHICAL RULES SUBCOMMITTEE.

Members of Committee.	March 14, 1910.	Total.
CHAIRMAN OF CENTRAL ETHICAL COMMITTEE (Chairman)	1	1
Langdon-Down, Dr. R., Hampton Wick	1	1

COLONIAL COMMITTEE.

Members of Committee.	Oct. 11, 1909.	Jan. 10, 1910.	Total.
MORIER, Dr. C. G. D., London (Chairman)	1	1	2
President (*ex officio*)	—	—	—
Chairman of Representative Meetings (*ex officio*) ...	—	—	—
Chairman of Council (*ex officio*)	—	1	1
Cousins, Mr. J. Ward, Portsmouth	1	1	2
Ewart, Dr. David, London	1	—	1
Francis, Dr. H. A., London	—	1	1
Greenlees, Dr. T. D., London	1	1	2
Mason, Dr. J. M., London	—	1	1
Simpson, Lieut.-Col., C.M.G., London	1	1	2
Meeting of Colonial Representatives on Central Council to elect 5 members from their number to serve upon the Colonial Committee:			
Ewart, Dr. David (New Zealand Branch)	1	—	1
Greenlees, Dr. T. D. (Cape of Good Hope Branch) ...	1	—	1
Martin, Dr. C. J., F.R.S. (Sydney and N.S.W. Branch)	1	—	1
Morier, Dr. C. G. D. (S. and W. Australia Branch) ...	1	—	1
Simpson, Lieut.-Col. R. J. S., C.M.G. (Griqualand, Natal and Transvaal Branch)	1	—	1
Syme, Mr. G. A. (Melbourne and Victoria Branch) ...	1	—	1

CONFERENCE BETWEEN SPECIAL SUBCOMMITTEE OF COLONIAL COMMITTEE AND COLONIAL RECEPTION COMMITTEE OF ANNUAL MEETING, 1910.

Members of Committee.	Feb. 23, 1910.	Total.
MORIER, Dr. C. G. D., London (Chairman)	1	1
Anderson, Dr. J. Ford, London	1	1
Armour, Mr. Donald, London	1	1
Greenlees, Dr. T. D., London	1	1
Mason, Dr J. M., London	1	1
Symonds, Mr. Charters, London	1	1
Twynam, Dr. G. E., London	1	1
Williams, Dr. A. H., Harrow	1	1

ELECTION RETURNS COMMITTEE.

Members of Committee.	July 28, 1909.	Total.
CLARK, Mr. ANDREW, London (Chairman)	1	1
Chairman of Representative Meetings	1	1
Treasurer	1	1
Buist, Dr. R. C., Dundee	1	1
Domville, Mr. E. J., Exeter	1	1
Joubert de la Ferté, Col. C. H., Weybridge	1	1
Kinsey, Mr. R. H., Bedford	1	1
Macdonald, Dr. J. A., Taunton	1	1

HOSPITALS COMMITTEE.

Members of Committee.	Oct. 7, 1909.	Jan. 6, 1910.	April 7, 1910.	Total.
KER, Mr. HUGH R., London (Chairman)	1	1	1	3
Reid, Dr. T. Whitehead, Canterbury (late Chairman) (dead)	1	—	—	1
President (*ex officio*)	—	—	—	—
Chairman of Representative Meetings (*ex officio*) ...	—	—	—	—
Chairman of Council (*ex officio*)	1	—	1	2
Treasurer (*ex officio*)	—	—	—	—
Anderson, Dr. J. Ford, London	1	1	1	3
Johnstone, Mr. R. J., Belfast	1	1	1	3
Joubert de la Ferté, Colonel C. H., I.M.S., Weybridge	1	—	—	1
Mackintosh, Dr. D. J., M.V.O., Glasgow	1	1	1	3
Pope, Dr. F. M., Leicester	1	—	—	1
Roberts, Dr. H. Jones, Penygroes		—	—	—
St John, Mr. W. St. A., Derby		—	—	—
Shaw, Dr. Lauriston E., London	1	1	1	3
Trotter, Dr. A., Perth	1	—	1	2

HAMPSTEAD HOSPITAL SUBCOMMITTEE.

Members of Committee.	Oct. 7, 1909.	Oct. 27, 1909	Feb. 22, 1910.	Total.
THE LATE CHAIRMAN OF HOSPITALS COMMITTEE (Dr. Reid) (Chairman)	—	1	—	1
Pope, Dr. F. M., Leicester	1	1	1	3
Shaw, Dr. Lauriston E., London	1	1	1	3

KING'S COLLEGE HOSPITAL SUBCOMMITTEE.

Members of Committee.	Nov. 11, 1909.	Total.
THE LATE CHAIRMAN OF HOSPITALS COMMITTEE (Dr. Reid) (Chairman)	1	1
Anderson, Dr. J. Ford, London	1	1
Ker, Mr. Hugh R., London	1	1
Shaw, Dr. Lauriston E., London	1	1

IRISH COMMITTEE.

Members of Committee.	July 26, 1909.	Oct. 16, 1909.	Jan. 15, 1910.	Total.
SHAW, Dr. CECIL E., Belfast (Chairman)	1	1	—	2
President (*ex-officio*)	—	—	—	—
Chairman of Representative Meetings (*ex officio*) ...	—	—	—	—
Chairman of Council (*ex officio*)	—	—	—	—
Treasurer (*ex officio*)	—	—	—	—
Carey, Dr. R. B., Borris	—	1	—	1
Cooke, Dr. J. G., Londonderry	1	—	—	1
Corby, Professor Henry, Cork	—	1	—	1
Craig, Dr. James, Dublin	1	1	1	3
Darling, Dr. J. S., Lurgan	1	1	1	3
Giusani, Dr. J. J., Cork	—	—	—	—
Johnstone, Mr. R. J., Belfast	1	1	—	2
Kenny, Dr. J. M., Granard	1	1	1	3
Lee, Dr. Philip G., Cork	—	—	1	1
Mahon, Dr. R. B., Ballinrobe	1	—	1	2
Mills, Dr John, Ballinasloe	1	1	1	3
Quirke, Dr. James, Piltown	—	1	—	1
Walshe, Dr. Denis, Graigue	—	1	1	2
White, Professor A. H., Dublin (Honorary Secretary)	1	1	1	3

JOURNAL AND FINANCE COMMITTEE.

Members of Committee.	Oct. 20, 1909.	Jan. 19, 1910.	April 20, 1910.	Total.
TREASURER (Chairman)	1	1	1	3
President (*ex officio*)	—	—	—	—
Chairman of Representative Meetings (*ex officio*) ...	—	1	1	2
Chairman of Council (*ex officio*)	1	1	1	3
Buist, Dr. R. C., Dundee	1	—	—	1
Carline, Dr. W. A., Lincoln	1	1	1	3
Goyder, Dr. D., Bradford	1	1	—	2
Haslip, Dr. G. E., London	1	1	—	2
Horsley, Sir Victor, F.R.S., London	1	1	1	3
Johnston, Dr. R. McKenzie, Edinburgh	1	1	1	3
Ker, Mr. Hugh R., London	1	1	1	3
Larkin, Mr. F. C., Liverpool	1	1	1	3
Macdonald, Dr. J. A., Taunton	—	1	1	2
Verrall, Mr. T. Jenner, Bath	1	1	1	3
Williams, Mr. D. J., Llanelly	1	—	1	2

JOURNAL AND FINANCE SUBCOMMITTEE *RE* DUTIES OF SECRETARIAT.

Members of Committee.	Nov. 26, 1909	Dec. 22, 1909	Jan. 12, 1910.	Total.
TREASURER (Chairman)	1	1	1	3
Chairman of Representative Meetings	1	1	1	3
Chairman of Council	1	1	—	2
Haslip, Dr. G. E., London	1	1	—	2
Horsley, Sir Victor, F.R.S., London	1	1	1	3
Macdonald, Dr. J. A., London	—	—	—	—

JOURNAL AND FINANCE SUBCOMMITTEE.

(A) *Re* ISSUE OF SUPPLEMENT TO NON-MEMBERS; (B) APPOINTMENT OF A SUBCOMMITTEE TO CONTROL ADVERTISEMENTS IN THE BRITISH MEDICAL JOURNAL; (C) ACCIDENT POLICY.

Members of Committee.	Nov. 26, 1909.	April 13, 1910.	Total.
BUIST, Dr. R. C., Dundee (Chairman)...	1	1	2
Chairman of Representative Meetings	1	—	1
Chairman of Council	—	—	—
Treasurer	1	1	2
Chairman Medico-Political Committee	—	—	—
Chairman of Ethical Committee	1	—	1
Haslip, Dr. G. E., London	1	1	2
Ker, Mr. Hugh R., London	—	1	1
Verrall, Mr. T. Jenner, Bath	—	—	—

MEDICO-POLITICAL COMMITTEE.

Members of Committee.	Oct 6, 1909.	Jan. 5, 1910.	April 6, 1910.	April 13, 1910	Total.
MACDONALD, Dr. J. A., Taunton (Chairman)	1	1	1	1	4
President (*ex officio*)	—	—	—	—	—
Chairman of Representative Meetings (*ex officio*) ...	1	1	—	1	3
Chairman of Council (*ex officio*)	—	1	—	—	1
Treasurer (*ex officio*)	—	—	—	1	1
Armit, Mr. H. W., Wembley	1	1	1	1	4
Domville, Mr. E. J. (Chairman of Public Health Committee)	1	1	1	—	3
Flemming, Mr. C. E. S., Bradford-on-Avon	1	1	1	1	4
Fothergill, Dr. E. R., London	1	1	1	1	4
Fullerton, Mr. Andrew, Belfast	1	—	—	—	1
Lawson, Dr. D., Nordrach-on-Dee, N.B.	—	1	—	1	2
Macfie, Dr. Charles, Bolton	1	1	1	1	4
Nash, Mr. E. H. T., Wimbledon	1	1	1	—	3
Straton, Mr. C. R., Wilton	1	1	1	1	4
Taylor, Dr. J. H., Salford	1	1	1	1	4
Todd, Dr. D. F., Sunderland	1	—	1	—	2
Verrall, Mr. T. Jenner, Bath	1	1	1	1	4

MEDICO-POLITICAL SUBCOMMITTEE *RE* PAYMENT OF CORONERS' FEES TO NAVAL SURGEONS.

Members of Committee.	Nov. 5, 1909.	Total.
CHAIRMAN OF REPRESENTATIVE MEETINGS	1	1
Chairman of Medico-Political Committee (*ex officio*)...	1	1
Biden, Fleet Surgeon E. J., R.N., Fareham	1	1
Verrall, Mr. T. Jenner, Bath	1	1

CONTRACT PRACTICE SUBCOMMITTEE.

Members of Committee.	Sept. 22, 1909.	Dec. 8, 1909.	March 18, 1910.	Total.
CHAIRMAN OF REPRESENTATIVE MEETINGS (Chairman)	1	1	1	3
Chairman of Medico-Political Committee (*ex officio*)...	1	—	1	2
Domville, Mr. E. J., Exeter	—	1	1	2
Flemming, Mr. C. E. S., Bradford-on-Avon	1	1	1	3
Fothergill, Dr. E. R., London...	—	1	1	2
Lawson, Dr. David, Nordrach-on-Dee	1	1	1	3
Nash, Mr. E. H. T., Wimbledon	1	1	1	3
Owen, Mr. Edmund, London	—	1	—	1
Straton, Mr. C. R., Wilton	1	1	1	3
Taylor, Dr. J. H., Salford	1	1	1	3
With—				
Greer, Mr. W. J., Newport, Mon.	1	1	1	3
Howell, Dr. R. E., Middlesbrough	—	1	1	2
Lydall, Dr. W. T., Birmingham	1	1	1	3
Rose, Mr. Percy, London	1	1	1	3
Williams, Dr. A. H., Harrow	1	1	1	3
*Todd, Dr. D. F., Sunderland...	1	—	—	1
Bateman, Dr. A. G., London	—	1	—	1
Maclean, Dr. E. J., Cardiff	—	1	—	1
Anderson, Miss L. Garrett, M.D., London	1	1	—	2
Thorne, Miss May, M.D., London	1	1	—	2
*Jackson, Mr, George, Plymouth	1	—	—	1

* Ceased to be a member after September 22nd, 1909.

CONTRACT PRACTICE SPECIAL SUBCOMMITTEE *RE* FEDERATED SOCIETIES' MEDICAL BENEFIT ASSOCIATION, AND METROPOLITAN PROVIDENT MEDICAL ASSOCIATION.

Members of Committee.	Jan. 19, 1910.	Total.
CHAIRMAN OF CONTRACT PRACTICE SUBCOMMITTEE (Chairman)	1	1
Chairman of Medico-Political Committee	—	—
Chairman of Public Health Committee	—	—
Fothergill, Dr. E. R., London	1	1
Rose, Mr. Percy, London	1	1
Representatives of Metropolitan Counties Branch:		
Armit, Mr. H. W.	1	1
Capes, Dr. Robert	—	—
Southcombe, Dr. A. G.	1	1

CONTRACT PRACTICE SPECIAL SUBCOMMITTEE *RE* PATHOLGISTS AND BACTERIOLOGISTS.

Members of Committee.	March 17, 1910	Total.
CHAIRMAN OF CONTRACT PRACTICE SUBCOMMITTEE (Chairman)	1	1
Armit, Mr. H. W., Wembley	1	1
Greer, Mr. W. J., Newport, Mon.	1	1
Nash, Mr. E. H. T. (Wimbledon)	1	1
Pathological Society of Great Britain:		
Andrewes, Dr. F. W.	1	1
Boycott, Dr. A. E.	1	1

CONTRACT PRACTICE SPECIAL SUBCOMMITTEE *RE* INSTRUCTION IN HYGIENE.

Members of Committee.	Jan. 11, 1909.	Total.
CHAIRMAN OF CONTRACT PRACTICE SUBCOMMITTEE (Chairman) ...	1	1
Nash, Mr. E. H. T., Wimbledon ...	1	1
Chairman of Public Health Committee ...	1	1
Treasurer ...	1	1

CONTRACT PRACTICE SPECIAL SUBCOMMITTEE *RE* POSTAL MEDICAL SERVICE SUBCOMMITTEE.

Members of Committee.	March 17, 1910.	Total.
CHAIRMAN OF CONTRACT PRACTICE SUBCOMMITTEE (Chairman) ...	1	1
Fothergill, Dr. E. R., London ...	1	1
Rose, Mr. Percy, London ...	—	—
Taylor, Dr. J. H., Salford ...	1	1
Williams, Dr. Alfred H., Harrow ...	1	1

CORONERS SUBCOMMITTEE.

Members of Committee.	Nov. 10, 1909.	Nov. 17, 1909.	Dec. 1, 1909.	Total.
VERRALL, Mr. T. JENNER, Brighton ...	1	1	1	3
Chairman of Medico-Political Committee (*ex officio*)...	—	—	—	—
Armit, Mr. H. W., Wembley ...	1	1	1	3
Atkinson, Dr. W. A., London ...	1	1	1	3
Bateman, Dr. A. G., London ...	1	1	1	3
Finucane, Dr. Morgan, London ...	1	1	1	3
Fothergill, Dr. E. R., London...	1	1	1	3
Horsley, Sir Victor, F.R.S., London ...	1	1	1	3
Nash, Mr. E. H. T., Wimbledon ...	1	1	1	3
Parkinson, Mr. C. H. W., Wimborne ...	1	1	1	3
Todd, Dr. D. F., Sunderland ...	—	1	—	1
Woods, Dr. Hugh, London ...	1	1	1	3

DISTRICT NURSES AND MIDWIVES SUBCOMMITTEE.

Members of Committee.	Nov. 10, 1909.	Dec. 22, 1909.	Feb. 23, 1910.	Total.
FLEMMING, Mr. C. E. S., Bradford-on-Avon (Chairman)	1	1	1	3
Chairman of Medico-Political Committee (*ex officio*)...	—	—	—	—
Fothergill, Dr. E. R., London ...	1	1	1	3
Nash, Mr. E. H. T., Wimbledon ...	1	1	1	3
Straton, Mr. C. R., Wilton ...	1	1	1	3
Taylor, Dr. J. H., Salford ...	1	1	1	3
Andrews, Dr. H. Russell, London ...	—	1	1	2
Coombe, Mr. Russell, Exeter ...	1	—	—	1
Drury, Mr. Arthur, Halifax ...	—	1	1	2
Helme, Dr. T. A., Manchester...	—	—	1	1
Maclean, Dr. E. J., Cardiff ...	1	—	—	1
Stephenson, Mr. Sydney, London ...	1	1	—	2

INDIAN HOSPITALS SUBCOMMITTEE.

Members of Committee.	Oct. 27, 1909.	Total.
JOUBERT DE LA FERTÉ, Colonel C. H., I.M.S., Weybridge ...	1	1
Chairman of Medico-Political Committee (*ex officio*)...	1	1
Chairman of Representative Meetings ...	1	1
Chairman of Council ...	1	1
Browne, Surgeon-General W. R., C.I.E., I.M.S., London	1	1
Reid, Dr. T. Whitehead, Canterbury (dead) ...	1	1

LIFE INSURANCE (FEES FOR MEDICAL EXAMINATION) SUBCOMMITTEE.

Members of Committee.	Dec. 8, 1909.	Total.
CHAIRMAN OF REPRESENTATIVE MEETINGS ...	1	1
Chairman of Medico-Political Committee, *ex officio* ...	—	—
Lawson, Dr. David, Banchory ...	1	1
Macfie, Dr. Charles, Bolton ...	1	1
With—		
Kirby, Dr. E. D., Edgbaston ...	1	1
Shadwell, Dr. St. Clair B., London ...	1	1
Swayne, Dr. F. G., London ...	1	1

MEDICAL INSPECTION AND TREATMENT OF SCHOOL CHILDREN SUBCOMMITTEE

Members of Committee.	March 3, 1910.	March 30, 1910.	April 4, 1910.	Total.
HORSLEY, Sir VICTOR, F.R.S., London (Chairman) ...	1	1	1	3
Chairman of Representative Meetings				
Chairman of Medico-Political Committee (*ex officio*)...	—	—	—	—
Flemming, Mr. C. E. S., Bradford-on-Avon (Vice-Chairman) ...	1	1	—	2
Fothergill, Dr. E. R., London ...	1	1	1	3
Macfie, Dr. Chas., Bolton ...	1	1	—	2
Nash, Mr. E. H. T., London ...	1	1	1	3
Rayner, Dr. Edwin, Stockport ...	1	1	—	2
Todd, Dr. D. F., Sunderland ...	—	1	—	1
With—				
Andrew, Dr. J. Grant, Glasgow ...	1	1	—	2
Beckett-Overy, Dr. H., London ...	—	1	—	1
Fremantle, Mr. F. E., London ...	1	1	1	3
Greenwood, Dr. Alfred, Blackburn ...	1	1	—	2
Jones, Mr. Herbert, Hereford...	1	—	1	2
Kerr, Dr. James, London ...	—	—	1	1
Langdon-Down, Dr. R. L., Hampton Wick ...	—	1	—	1
Williams, Dr. A. H., Harrow ...	1	1	—	2

PARLIAMENTARY SUBCOMMITTEE.

Members of Committee.	Dec. 16, 1909.	Jan. 25, 1910.	Total.
VERRALL, Mr. T. JENNER, Bath (Chairman) ...	1	1	2
Chairman of Medico-Political Committee (*ex officio*)...	—	—	—
Armit, Mr. H. W., Wembley ...	1	1	2
Domville, Mr. E. J., Exeter ...	1	1	2
Flemming, Mr. C. E. S., Bradford-on-Avon ...	—	—	—
Fullerton, Mr. Andrew, Belfast ...	—	—	—
Macfie, Dr. Chas., Bolton ...	1	1	2
Straton, Mr. C. R., Salisbury ...	1	1	2
With—			
Buist, Dr. R. C., Dundee ...	1	1	2
Horsley, Sir Victor, F.R.S., London ...	1	1	2
Larkin, Mr. F. C., Liverpool ...	1	1	2
Maclean, Dr. E. J., Cardiff ...	—	—	—
Swayne, Dr. F. G., London ...	1	—	1

SPIRITUAL HEALING SUBCOMMITTEE.

Members of Committee.	Dec. 29, 1909.	Total.
NASH, Mr. E. H. T., London (Chairman)	1	1
Chairman of Medico-Political Committee (*ex officio*)...	—	—
Armit, Mr. H. W., Wembley	1	1
Macfie, Dr. Chas., Bolton	1	1
With—		
Buttar, Dr. Chas., London	1	1
Buzzard, Dr. E. F., London	—	—
Helme, Dr. T. A., Manchester	—	—
Macdonald, Dr. J. A., Taunton	1	1
Scharlieb, Mrs. Mary, M.D., London	—	—
Thomson, Dr. D. G., Norwich	—	—
Woods, Dr. J. F., London	1	1

NAVAL AND MILITARY COMMITTEE.

Members of Committee.	Oct. 4, 1909.	Total.
JOUBERT DE LA FERTÉ, Colonel C. H., I.M.S., Weybridge (Chairman)	1	1
President (*ex officio*)	—	—
Chairman of Representative Meetings (*ex officio*) ...	—	—
Chairman of Council (*ex officio*)	1	1
Treasurer (*ex officio*)	—	—
Bentham, Inspector-General R., R.N., London ...	1	1
Biden, Fleet Surgeon E. J., R.N., Fareham	1	1
Browne, Surg.-General W. R., C.I.E., I.M.S., London	1	1
Cuffe, Sir Charles, K.C.B., London	1	1
Giles, Surg.-Col. P. B., V.D. (R.A.M.C.T.), Bletchley ...	—	—
Twiss, Lieutenant-Colonel G. E., R.A.M.C., Sholing ...	1	1

OPHTHALMIA NEONATORUM COMMITTEE.

Members of Committee.	Oct. 2, 1909.	Total.
STEPHENSON, Mr. SYDNEY, London (Chairman) ...	1	1
President (*ex officio*)	—	—
Chairman of Representative Meetings (*ex officio*) ...	—	—
Chairman of Council (*ex officio*)	—	—
Treasurer (*ex officio*)	1	1
Buist, Dr. R. C., Dundee	—	—
Helme, Dr. T. A., Manchester	1	1
Martin, Dr. C. J., F.R.S., London	1	1
Shaw, Dr. Cecil E., Belfast	—	—
Representatives of Societies—		
Andrews, Dr. H. Russell, London	1	1
Carpenter, Dr. George, London (dead)	—	—
Lawson, Mr. Arnold, London	—	—
Sergeant, Dr. E., Preston	—	—

ORGANIZATION COMMITTEE.

Members of Committee.	Sept. 14, 1909.	Oct. 5, 1909.	Dec. 7, 1909.	Jan. 7, 1910.	April 5, 1910.	April 20, 1910.	Total.
CLARK, Mr. ANDREW, London (Chairman)	1	1	1	1	1	1	6
President (*ex officio*)	—	—	—	—	—	1	1
Chairman of Representative Meetings (*ex officio*) ...	1	—	1	1	1	1	5
Chairman of Council (*ex officio*)	—	1	—	—	—	—	1
Treasurer (*ex officio*)	—	1	1	—	1	—	3
Davison, Dr. James, Bournemouth	1	1	1	1	1	1	6
Garstang, Mr. T. W. H., Altrincham	1	1	1	1	1	—	5
Greenlees, Dr. T. D., Streatham	1	1	1	—	—	1	4
Larkin, Mr. F. C., Liverpool	1	1	1	—	1	1	5
Moir, Dr. J. Munro, Inverness	1	1	1	—	1	—	4
Todd, Dr. D. F., Sunderland	1	1	1	—	1	1	5
Co-opted—							
Horsley, Sir Victor, F.R.C.S., London	—	1	1	—	—	1	3
Kirby, Dr. E. D., Edgbaston	1	1	1	1	1	1	6
Macdonald, Dr. J. A., Taunton	—	1	—	—	—	1	2
Verrall, Mr. T. Jenner, Bath	1	1	—	—	1	1	4
White, Prof. A. H., Dublin	—	1	1	—	—	—	

CAPITATION GRANTS SUBCOMMITTEE.

Members of Committee.	Nov. 24, 1909.	March 24, 1910.	Total.
LARKIN, Mr. F. C., Liverpool (Chairman)	1	1	2
Chairman of Organization Committee	1	1	2
Treasurer	1	1	2
Davison, Dr. James, Bournemouth	1	1	2
Kirby, Dr. E. D., Edgbaston	1	1	2

CONFERENCE OF SECRETARIES SUBCOMMITTEE.

Members of Committee.	Nov. 24, 1909.	Total.
LARKIN, Mr. F. C., Liverpool (Chairman)	1	1
Clark, Mr. Andrew, London	1	1
Griffith, Dr. W., London	1	1

ORGANIZATION SUBCOMMITTEE *RE* GROUPING OF BRANCHES, ETC.

Members of Committee.	Nov. 5, 1909.	Total.
CHAIRMAN OF ORGANIZATION COMMITTEE	1	1
Chairman of Representative Meetings	1	1
Mr. T. W. H. Garstang, Altrincham	1	1
Mr. T. Jenner Verrall, Bath	1	1

SUBCOMMITTEE ON ORGANIZATION OF MEDICAL STUDENTS.

Members of Committee.	Nov. 24, 1909.	March 24, 1910.	Total.
LARKIN, Mr F. C, Liverpool (Chairman)	1	1	2
Chairman of Organization Committee	1	1	2
Kirby, Dr. E. D., Edgbaston	1	1	2
Shaw, Dr. Lauriston E. London	1	1	2

SUBCOMMITTEE ON STANDING ORDERS OF REPRESENTATIVE MEETING AND COUNCIL.

Members of Committee.	Feb. 1, 1910	March 24, 1910.	Total.
CHAIRMAN OF ORGANIZATION COMMITTEE (Chairman)	1	1	2
Chairman of Representative Meetings	—	1	1
Chairman of Council	1	—	1
Macdonald, Dr. J. A., Taunton	1	1	2

SUBCOMMITTEE ON AMENDMENT OF REGULATIONS AS TO ELECTION OF REPRESENTATIVES IN REPRESENTATIVE MEETINGS.

Members of Committee.	Mar. 24, 1910.	Total.
CHAIRMAN OF ORGANISATION COMMITTEE	1	1
Chairman of Representative Meetings	1	1
Buist, Dr. R. C., Dundee	1	1
Larkin, Mr. F. C., Liverpool	1	1
Macdonald, Dr. J. A., Taunton	1	1

PUBLIC HEALTH COMMITTEE.

Members of Committee.	Oct. 12, 1909.	Jan. 11, 1910.	April 12, 1910.	Total.
DOMVILLE, Mr. E. J., Exeter (Chairman)	1	1	1	3
President (*ex officio*)	—	—	—	—
Chairman of Representative Meetings *ex officio*) ...	—	1	—	1
Chairman of Council (*ex officio*)	1	1	—	2
Treasurer (*ex officio*)	—	1	—	1
*Farquharson, Dr. A. C., Bishop Auckland	1	—	1	2
Garstang, Mr. T. W. H., Altrincham	1	1	1	3
Goyder, Dr. D., Bradford	1	1	1	3
Jones, Mr. Herbert, Hereford...	1	1	1	3
Manley, Dr. Herbert, West Bromwich	—	1	—	1
Nasmyth, Dr. T. G., Edinburgh	1	—	—	1

* See Attendance Book, January 11th, 1910.

EMERGENCY SUBCOMMITTEE.

Members of Committee.	Aug. 30, 1909.	Oct. 5 1909.	Total.
CHAIRMAN OF PUBLIC HEALTH COMMITTEE (Chairman)	1	1	2
Garstang, Mr. T. W. H., Altrincham	—	1	1
Goyder, Dr. D., Bradford	—	1	1
Jones, Mr. Herbert, Hereford...	1	1	2
Manley, Dr. Herbert, West Bromwich	1	—	1

SUBCOMMITTEE *RE* BILLS.

Members of Committee.	Feb. 18, 1910.	April 12, 1910.	April 22, 1910.	Total.
CHAIRMAN OF PUBLIC HEALTH COMMITTEE (Chairman)	1	1	1	3
Jones, Mr. Herbert, Hereford...	1	1	1	3

SUBCOMMITTEE *RE* NOTIFICATION OF TUBERCULOSIS.

Members of Committee.	Oct. 5, 1909.	Total.
CHAIRMAN OF PUBLIC HEALTH COMMITTEE (Chairman)	1	1
Garstang, Mr. T. W. H., Altrincham	1	1
Goyder, Dr. David, Bradford	1	1
Jones, Mr. Herbert. Hereford	1	1
Nasmyth, Dr. T. G., Edinburgh	—	—

SCIENCE COMMITTEE.

Members of Committee.	Oct. 2, 1909.	Jan 8, 1910.	April 2, 1910.	Total.
POPE, Dr. F. M, Leicester (Chairman)	1	1	1	3
President (*ex officio*)	—	—	—	—
Chairman of Representative Meetings (*ex officio*) ...	—	—	—	—
Chairman of Council (*ex officio*)	—	—	—	—
Treasurer (*ex officio*)	1	—	1	2
Andrew, Dr. J. Grant, Glasgow	—	—	1	1
Bradford, Professor Rose, F.R.S., London	—	—	—	—
Buist, Dr. R. C., Dundee	—	1	1	2
Dixon, Professor W. E, Cambridge	1	1	1	3
Haldane, Dr. J. S., F.R.S., Oxford	—	1	1	2
Martin, Dr. C. J., F.R.S., London	1	1	—	2
Nasmyth, Dr. T. G., Dunfermline	—	—	—	—
Shaw, Dr. Cecil E., Belfast	1	1	1	3
White, Professor A. H., Dublin	1	—	1	2
White, Dr. Sinclair, Sheffield	1	1	1	3

SUBCOMMITTEE ON ATHLETICISM IN SCHOOLS.

Members of Committee.	March 19, 1910.	Total.
CHAIRMAN OF SCIENCE COMMITTEE (Chairman) ...	1	1
Armstrong, Dr. H. G, Wellington, Berks	1	1
Collier, Dr. Wm., Oxford ... —	1	1
Haldane, Dr. J. S., F.R.S., Oxford	1	1
Shelley, Dr. C. E., Hertford	1	1
Simey, Dr. A. I., Rugby	1	1

STANDING LIBRARY SUBCOMMITTEE.

Members of Committee.	Dec 3, 1909.	Jan 8, 1910	Total.
CHAIRMAN OF SCIENCE COMMITTEE (Chairman) ...	1	1	2
Martin, Dr. C. J., F.R.S., London	1	—	1
Williams, Dr. Dawson, London	1	1	2

STEWART PRIZE SUBCOMMITTEE.

Members of Committee.	April 27, 1910.	Total.
CHAIRMAN OF SCIENCE COMMITTEE (Chairman) ...	1	1
Treasurer	1	1
Dixon, Professor W. E., Cambridge	1	1
Martin, Dr. C. J., F.R.S., London	1	1
White, Professor A. H., Dublin	1	1

SCOTTISH COMMITTEE.

Members of Committee.	Oct. 1, 1909.	Jan. 21, 1910.	Total.
BUIST, Dr. R. C., Dundee (Chairman)...	1	1	2
President (*ex officio*)	—	—	—
Chairman of Representative Meetings (*ex officio*) ...	—	—	—
Chairman of Council (*ex officio*)	—	—	—
Treasurer (*ex officio*)	—	—	—
Andrew, Dr. J. Grant, Glasgow	1	1	2
Boyd, Dr. F. D., Edinburgh	—	—	—
Christie, Dr. J. F., Aberdeen	—	—	—
Dewar, Dr. M., Edinburgh	1	—	1
Edmond, Dr. George, Aberdeen	—	—	—
Fraser, Dr. T., Aberdeen	—	—	—
Graham, Dr. R. Balfour, Fife...	—	—	—
Johnston, Dr. R. McKenzie, Edinburgh	1	1	2
Livingston, Dr. G. R., Dumfries	1	1	2
Low, Dr. A. P., Dundee	1	—	1
Macfarlane, Dr. W. D., jun., Glasgow	—	1	1
Mackintosh, Dr. D. J., M.V.O., Glasgow	1	1	2
Moir, Dr. J. Munro, Inverness (Honorary Secretary)...	1	1	2
Nasmyth, Dr. T. G., Dunfermline	—	—	—
Stewart, Dr. G. Clark, Falkirk	—	—	—
Taylor, Dr. W. A., Perth	—	1	1
Trotter, Dr. A., Perth	1	1	2

SPECIAL POOR LAW REFORM COMMITTEE.

Members of Committee.	Oct. 1, 1909	Nov. 5, 1909.	Dec. 3, 1909.	Dec. 22, 1909.	Jan. 12, 1910	Feb. 18, 1910.	March 4, 1910.	Mar. 18, 1910.	Total.
MACDONALD, Dr. J. A., Taunton (Chairman) ...	1	1	1	—	—	1	—	1	5
President (*ex officio*)	—	—	—	—	—	—	—	—	—
Chairman of Representative Meetings (*ex officio*)	1	1	1	1	1	—	—	1	6
Chairman of Council (*ex officio*)	1	1	1	1	—	—	—	—	4
Treasurer (*ex officio*)	—	—	—	1	—	—	—	1	2
Anderson, Dr. J. Ford, London	1	1	1	1	1	1	1	1	8
Buist, Dr. R. C., Dundee	—	1	1	1	—	1	—	—	4
Darling, Dr. J. S., Lurgan	—	1	1	—	—	—	—	—	2
Domville, Mr. E. J., Exeter	1	1	1	1	1	1	1	1	8
Fleming, Mr. C. E. S., Bradford-on-Avon ...	1	1	1	1	1	—	1	1	7
Fothergill, Dr. E. R., London	1	1	1	1	1	1	1	1	8
Garstang, Mr. T. W. H., Altrincham	1	1	1	1	1	1	1	1	8
Greenwood, Dr. Major, London	1	1	1	1	1	1	1	1	8
Jones, Mr. Herbert, Hereford	1	—	1	—	1	1	1	1	6
McVail, Dr. J. C., Glasgow	—	—	—	—	—	1	1	1	3
Mahon, Dr. D. R., Ballinrobe	—	—	1	—	—	—	—	—	1
Moir, Dr. J. Munro, Inverness	—	—	1	—	—	1	1	—	3
Pope, Dr. F. M., Leicester	1	—	—	—	—	—	—	—	1
Shaw, Dr. Lauriston E., London	1	1	1	1	1	1	1	1	8
Straton, Mr. C. R., Wilton	1	1	1	1	1	—	1	1	7
Taylor, Dr. J. H., Salford	1	1	1	1	1	1	1	1	8

CONFERENCES BETWEEN SPECIAL POOR LAW REFORM COMMITTEE AND CONTRACT PRACTICE SUBCOMMITTEE.

Members of Committee.	March 18, 1910.	April 1, 1910.	April 13, 1910.	Total.
MACDONALD, Dr. J. A. (Chairman)	1	1	1	3
President (*ex officio*)	—	—	—	—
Chairman of Representative Meetings (*ex officio*) ...	1	1	1	3
Chairman of Council (*ex officio*)	—	—	1	1
Treasurer (*ex officio*)	1	1	1	3
Anderson, Dr. J. Ford, London	1	1	1	3
Anderson, Miss L. Garrett, M.D., London	—	1	—	1
Bateman, Dr. A. G., London	—	1	—	1
Buist, Dr. R. C., Dundee	—	1	1	2
Darling, Dr. J. S., Lurgan	—	1	—	1
Domville, Mr. E. J., Exeter	1	1	—	2
Flemming, Mr. C. E. S., Bradford-on-Avon	1	1	1	3
Fothergill, Dr. E. R., London...	1	1	1	3
Garstang, Mr. T. W. H., Altrincham	1	1	1	3
Greenwood, Dr. Major, London	1	1	1	3
Greer, Mr. W. J., Newport, Mon.	1	1	1	3
Howell, Dr. R. E., Middlesbrough	1	1	1	3
Jones, Mr. Herbert, Hereford	1	1	—	2
Lawson, Dr. David, Banchory, N.B.	1	1	1	3
Lydall, Dr. W. T., Birmingham	1	1	—	2
Maclean, Dr. Ewen J., Cardiff	—	1	1	2
McVail, Dr. J. C., Glasgow	1	1	—	2
Mahon, Dr. D. R., Ballinasloe	—	—	—	—
Moir, Dr. J. Munro, Inverness	—	—	1	1
Nash, Mr. E. H. T., London	1	1	—	2
Pope, Dr. F. M., Leicester	—	—	—	—
Rose, Mr. Percy, London	—	—	—	—
Shaw, Dr. Lauriston E., London	1	1	1	3
Straton, Mr. C. R., Wilton	1	1	1	3
Taylor, Dr. J. H., Salford	1	1	1	3
Thorne, Dr. May	—	—	—	—
Williams, Dr. A. H., Harrow	1	1	1	3

TERRITORIAL FORCES COMMITTEE.

Members of Committee.	Dec. 7, 1909.	Jan. 7, 1910	Mar. 4, 1910.	Total.
CLARK, Colonel ANDREW, London (Chairman) ...	1	1	1	3
Chairman of Representative Meetings (*ex officio*) ...	1	—	—	1
Chairman of Council (*ex officio*)	1	—	—	1
Elliston, Col. G. S., Felixstowe	—	—	1	1
Giles, Surg.-Col. P. B., V.D. (R.A.M.C.T.), Bletchley ...	—	1	1	2
Milburn, Colonel C. H., Hull	1	—	1	2
Moir, Lt.-Col. J. Munro, Inverness	1	—	1	2
Roberts, Major Jones, Penygroes	—	—	—	—
Thomas, Colonel J. Raglan, Exeter	—	—	1	1
Todd, Major D. F., Sunderland	1	—	—	1
White, Lt.-Col. Sinclair, Sheffield	1	1	1	3

THERAPEUTIC COMMITTEE.

Members of Committee.	Oct. 30, 1909.	Total.
TIRARD, Dr. NESTOR, London (Chairman)	1	1
President (*ex officio*)	—	—
Chairman of Representative Meetings (*ex officio*) ...	—	—
Chairman of Council (*ex officio*)	—	—
Treasurer (*ex officio*)	—	—
Brown, Dr. T. E. Burton, Brondesbury	—	—
Cushny, Professor A. R., F.R.S., London	1	1
Davy, Dr. Henry, Exeter	1	1
Dixon, Professor W. E., M.D., Cambridge	—	—
Greenish, Professor, London	1	1
Marshall, Professor C. R., M.D., Dundee	1	1
Martin, Dr. C. J., F.R.S., London	1	1
Shaw, Dr. Lauriston E., London	—	—
Smith, Dr. F. J., London	1	1
Stockman, Professor Ralph, Glasgow...	—	—
Wild, Professor R., M.D., Manchester	1	

Meetings of Branches & Divisions.

BATH AND BRISTOL BRANCH.

THE sixth ordinary meeting of the session was held at Bath on April 27th. Dr. SHINGLETON SMITH took the chair, and there were twenty-eight members and visitors present.

Communications.—Dr. MARY MORRIS showed a case of congenital deformity of the arm and leg. Dr. GEO. PARKER read notes on biliary and intestinal sand, and Dr. SHINGLETON SMITH, Dr. ALEXANDER, Dr. NEWMAN NEILD, Dr. WATSON WILLIAMS, and Dr. KENNEDY joined in the discussion which ensued. Dr. WATSON WILLIAMS related a case of chronic suppuration in extraordinarily large frontal sinuses cured by the osteoplastic method of operation, and showed the patient. Dr. R. WATERHOUSE read a paper on bromoform poisoning, with an account of two cases. Dr. MARTIN and Dr. ALEXANDER commented upon the paper. Dr. G. H. H. ALMOND described a case of oxycephaly, and showed the patient. The case was illustrated by lantern slides by Mr. W. M. Beaumont. Remarks were made by Dr. WATERHOUSE and Dr. KENNEDY.

BIRMINGHAM BRANCH:
CENTRAL DIVISION.

A GENERAL meeting of the Division was held at 3.30 p.m. on Wednesday, April 20th, at the Medical Institute. In the absence of Dr. Walter R. Jordan, Dr. BRANSON (Vice-Chairman) presided, and there were twenty other members present.

Confirmation of Minutes.—The minutes of the previous meeting were read, confirmed, and signed.

Apology for Non-attendance.—An apology for non-attendance was announced from Mr. J. F. Jordan.

The late Professor Taylor.—Dr. WALTER JORDAN, who had now arrived, moved the following resolution:

> The members of the Central Division desire to place on record the deep sense of loss that they feel at the deaths of Professor John Taylor, Dr. Thomas Richards, and Mr. Victor Milward, and to assure the relations of their profound sympathy with them in their bereavement.

This was seconded by Dr. ALDREN, and carried unanimously, all members present rising in their places.

Election of Extra Representative.—The CHAIRMAN next invited nominations for an extra representative on the Branch Council, to which the Division had become entitled owing to increase in members. Drs. Aldren, Branson, and Stanley were nominated, but, as the two latter expressed their inability to serve, the CHAIRMAN pronounced Dr. Aldren duly elected.

Poor Law Reform.—The Interim Report of the Poor Law Reform Committee was next considered. The Division unanimously decided to agree with the general conclusions of the Committee.

Relation of Homoeopaths to the Association.—The Report of the Council on the relation of homoeopaths to the Association was discussed at length, the resolutions moved on behalf of the Executive being carried in each case. All the questions were answered in the affirmative, but the Representative was instructed to move as an addition to B the words:

> or to associate himself with any institution devoted to practice based upon peculiar views of pathology or treatment.

Instruction in First Aid, etc.—The HONORARY SECRETARY read the memorandum from the Territorial Forces Committee, "Instruction in First Aid and Field Nursing to Voluntary Aid Detachments," and after some discussion the following recommendation was unanimously approved:

> That medical practitioners should not be expected to give the preliminary instruction necessary to qualify for membership of a detachment without suitable remuneration.

GLOUCESTERSHIRE BRANCH.

A GENERAL meeting of this Branch was held at the Cheltenham General Hospital on April 21st, at 7 p.m. The PRESIDENT was in the chair, and twenty-three members present.

Confirmation of Minutes.—The minutes of the last meeting were read and confirmed.

Relation of Homoeopaths to the Association.—The meeting answered the following question from the Central Ethical Committee in the affirmative: "Is the Division of opinion that the Association should not attempt to pronounce, in this or any other connexion, what constitutes sound doctrine in medicine or surgery, nor condemn individual practitioners on the ground they hold peculiar views of pathology or treatment, or give effect to such views in the practice of their profession?"

Poor Law Reform.—The meeting also agreed to the following conclusions of the Special Poor Law Reform Committee:

> That any system of medical assistance, to prove satisfactory to the ratepayers, to the beneficiaries, or to the medical profession, must include the following principles:
> 1. That medical services rendered on behalf of the State should be paid for by the State.
> 2. That the payment should be adequate and in accordance with the professional services required.
> 3. That there should be adequate medical representation on all committees formed to control medical assistance.

Paper.—Dr. COLLINS read a paper on the Value of an Examination of the Cerebro-spinal Fluid in General Practice. A discussion followed, by the PRESIDENT, Dr. H. BRAMWELL, Dr. CARTER, Dr. PIKE.

Specimens.—Dr. BURT and Dr. COLLINS showed specimens from a case of lymphatism which died under an anaesthetic, and read notes of several cases.

Annual Meeting.—The annual meeting will be held at Stroud on May 19th.

METROPOLITAN COUNTIES BRANCH:
WALTHAMSTOW AND CITY DIVISIONS.

A CONJOINT meeting of the Walthamstow and City Divisions was held in the out-patient department of the Walthamstow Hospital on Thursday, April 21st, at 4 p.m. Twenty-five members and several visitors were present. Dr. R. JONES presided, in the unavoidable absence of the Chairman.

Confirmation of Minutes.—The minutes of the previous meeting were read and confirmed.

Apologies for Non-attendance.—Apologies for non-attendance were received from Drs. Harford and Goodall.

School Children Committee.—A letter from the School Children Committee of the Branch was read and referred to the Executive Committee for consideration.

Increased Pressure within the Skull.—A paper entitled "The Causes and Treatment of Increased Pressure within the Skull" was then read by Sir VICTOR HORSLEY, and a number of most interesting lantern slides were exhibited by the lecturer in illustration of his masterly discourse. In the course of the lecture Sir Victor Horsley dealt with the construction of the skull and the nature of its contents, emphasizing the supreme importance of the falx and tentorium in limiting the direction of the pressure. The circulation of the cerebro-spinal fluid was described, together with the chief points of obstruction to its flow. Two forms of pressure, solid and fluid, were commented upon and their results in causing sensory and motor alterations, each of a definite character, according to their location, were lucidly described. The treatment of hydrocephalus by repeated aspiration and pressure by elastic bandage deeply impressed his audience. Vomiting in cases of increased pressure was stated to be always due to direct pressure upon the medulla, and it was pointed out that great increase of pressure in other situations within the skull might exist without any vomiting whatever. A discussion followed, and questions were asked by Drs. R. JONES, BASIL PRICE, and CORNER. Sir VICTOR HORSLEY replied to the questions as they arose.

Vote of Thanks.—A vote of thanks to Sir Victor Horsley was proposed by Dr. C. H. WISE, and seconded by Dr. CORNER. This was accorded with acclamation. Sir VICTOR HORSLEY thanked the audience in a few well chosen words, and the meeting then terminated.

METROPOLITAN COUNTIES BRANCH:
WANDSWORTH DIVISION.

A Correction.—In Form B. of the scheme of the Wandsworth Division for the treatment of school children found on medical inspection to be defective, published in the SUPPLEMENT of April 2nd, p. 143, the word "Ear" was inadvertently omitted between the words "Eye" and "Throat" in the eighth line from the foot of the page. The sentence should read as follows: Only cases of Ringworm and of Eye, Ear, Throat, and Nose defects of children of school age and who attend a L.C.C. Provided or Non-Provided School are eligible.

MEDICAL TREATMENT OF SCHOOL CHILDREN IN LONDON.

METROPOLITAN COUNTIES BRANCH.

A CONFERENCE of the Metropolitan Counties Branch of the British Medical Association and of the medical staffs of the metropolitan hospitals, on the subject of medical treatment of school children found on medical inspection to be defective, was held at St. James's Vestry Hall, Piccadilly, on Wednesday, May 4th. Dr. FORD ANDERSON (Chairman of the Metropolitan Counties Branch) was in the Chair, and the hall was crowded, every seat being occupied.

Dr. FORD ANDERSON, in opening the proceedings, stated that the meeting had been convened by the Metropolitan Counties Branch to confer with the staffs of hospitals in order to arrive at some conclusions as to the method in which the treatment of children who were found defective should be carried out. The aim was by friendly discussion to in some way co-ordinate views on the subject, and, in the words of the circular calling the meeting, to place it "on a basis which shall meet the urgent public needs of the national physique, and at the same time fully satisfy the just interests of the profession." The importance of the subject was very great; it was important to the public, to the children, and to the medical profession. Moreover, it was most urgent. Its urgency arose from the fact that it was new work, and while the work was, so to speak, young, was the time to give it an impress which would carry it through a long existence. The Chairman referred to the extent to which the medical profession suffered from medical institutions founded in a casual way, without patient deliberation on the part of the profession. Such institutions were very often founded by the goodwill of some benevolent person, and, as the years rolled on, acquired a hard crust of evil tradition very difficult to break down. It must be the wish of all present that in the case of the treatment of school children no similar mistake should be made, but that the matter should be put upon a proper basis. It was always the first step which had to be considered, and if the first step were right everything would go on well. The present opportunity was an admirable one, because those concerned had, so to speak, a clean sheet. Nothing of the sort had been done before, and what was to be done rested upon the decision of the medical profession, because what the profession decided the public, as represented by municipal bodies, must accept. He trusted that the "clean sheet" would not be blurred in any way, and that an undesirable institution would not be transmitted to posterity. The Conference had to deal with a novelty. The Education (Administrative Provisions) Act, 1907, had conferred upon the London County Council, amongst other authorities, a command to inspect, and permission to treat, school children found defective. Availing itself of that permission, the London County Council had been trying to provide for children suffering from diseases of the eye, throat, nose, and ear, and ringworm; but, unfortunately, its methods did not meet with the approval of the British Medical Association. It remained for the Conference to express its opinion whether the British Medical Association was right in its decision to oppose as much as it could the reference of such children to the hospitals, and he trusted those present would give the matter most careful consideration. He then called upon Sir Victor Horsley to move the resolutions.

Sir VICTOR HORSLEY said that the resolutions he would propose were as follows:

1. That, in the opinion of this Conference, the provisional arrangements made by the London County Council for the medical treatment of elementary school children are wholly inadequate for this national purpose, and involve abuses of charitable medical institutions.
2. That in the opinion of this Conference, provision should be made by the London County Council for the medical treatment of school children at suitable centres by local medical practitioners.

This national question was raised by the House of Commons passing the Act providing for the medical inspection of school children. Unfortunately the intention of the Legislature, which was founded on the report of the Committee of the House of Commons on the physical deterioration of the nation, had never been fulfilled; there was no education authority at the present moment which had inspected all the children under its care. The physical census of the nation which Parliament intended had therefore not yet been obtained. In this respect the London education authority was perhaps no worse than any other. But the London Education Authority (that was to say, the school medical officer) had discovered that far more children required medical treatment and medical attention than even were estimated two years ago by the subcommittee of the London County Council; and therefore the absence of this complete medical inspection was in itself a national question. The meeting, however, had not assembled to discuss that, but he mentioned it because it affected the basis of certain estimates which he would have to refer to later. The British Medical Association foresaw from the first that medical treatment must follow medical inspection, and that medical treatment—and medical inspection, of course, as well—could not be properly carried out unless there was a medical bureau on the Board of Education. It would probably be remembered that after the meeting of Representatives in Caxton Hall three years ago the Association pressed upon the Board of Education the institution of a national bureau. That proposal was carried, and fortunately at the head of that bureau was now Dr. Newman, the former medical officer of health for Finsbury. The question of medical treatment had not come before the House of Commons till 1907, when it was passed, as had been said, in a promiscuous way. The London County Council, in order to find out how much it would have to do, appointed a subcommittee of its Education Committee, and co-opted on to that subcommittee representatives of various medical bodies. They invited the British Medical Association to send a representative, and he, (Sir Victor Horsley), was chosen. The subcommittee of the County Council examined into the whole question to ascertain how many children there were requiring treatment, and how the treatment was to be carried out in the most efficient way. Without going into the matter in detail, it might be said that the subcommittee reported that the most efficient way was to collect the children in centres or clinics in the neighbourhood of the schools. Next appeared the unfortunate Circular 596 of the Board of Education, which contained a passage suggesting that perhaps the Education Authorities would better begin the work by endeavouring to get the charitable institutions in their district to take it up. But the subcommittee of the County Council had already pointed out that the charitable institutions in the metropolis were all clustered together in the centre. Dr. Newman in his reply to the deputation from the Metropolitan Counties Branch the other day (SUPPLEMENT, April 2nd, p. 133) stated that the House of Commons had already threshed out the use of charitable institutions and intended it to take place. He (Sir Victor) was not aware that the House of Commons had done anything of the kind, and asked Dr. Newman for the reference to the debate in the House of Lords. The debate to which Dr. Newman

referred him took place in 1906, and referred not to charitable institutions but to the Children's Happy Evenings Association, which was a different thing altogether. So there was no basis whatever for the assertion which was to be found in this unfortunate circular of the Board of Education that the charitable institutions of the metropolis were to be employed in this manner. This circular, however, had the natural effect of leading other people into error. It led the London County Council into error. The County Council, instead of accepting the report of its own subcommittee dividing the metropolis into clinic districts, threw out the report, and, behind the back of the medical profession, which after all was to carry out the work, instituted negotiations with various charitable institutions. The scheme which it put forward had to be referred constitutionally to the Board of Education. The Metropolitan Counties Branch, becoming aware of this, immediately approached the Board of Education, referred to the subcommittee's report of the County Council, and endeavoured to get the Board to consider the matter more from a national standpoint; that was, not to regard it as a matter of mere expediency, but to put it on a proper basis. Mr. Runciman, however, had already made up his mind to allow the County Council scheme to be on trial for a year, and that was the position at the present time. He was sorry that any member of the staff of hospitals should have agreed to the scheme of the County Council, because he must have had before him in the BRITISH MEDICAL JOURNAL of January 9th, 1909, p. 96, the report which showed that the scheme was a chaos of charity and business; it was neither one thing nor the other. And further that the report of the Annual Meeting of the Association at Belfast indicated that it was a wrong principle altogether for the State to endeavour to get new services carried out on its behalf by, as it were, trading on the charitable institutions of the country. He would point out that only very few hospitals had consented to work this scheme, even for the provisional period of one year. University College Hospital, for which he could speak, asked at the outset for the cost of installation, and was refused, and therefore naturally declined to have anything further to do with the scheme. Other hospitals were in the same position. Members of the London County Council went to the length of getting charitable people to give sums of money to install these clinics in the charitable institutions themselves—a confused medley, as he had before said of charity and business. He would not dwell upon the question of the abuse of the charities, but would turn at once to the inadequacy of the London County Council scheme, and would point out that the second resolution on the paper indicated a better method. With regard to the inadequacy of the London County Council scheme, the subcommittee of the London County Council had shown that an enormous number of children required attention, yet the scheme only provided for about a quarter of them; and for these over so long a period of time that it was calculated that some of them would not be treated for fifteen months. From the point of view, therefore, of number of children to be treated and the provision made for them, the County Council scheme was hopelessly inadequate. The hospitals themselves had not adequate capacity or provision, but in his opinion the most flagrant blot on the scheme was the fact that the hospitals are not situated in the areas where the children were. That would not have mattered so much had the County Council organized a scheme to transport them from north, south, east, and west to the hospitals; but it had not. No transport whatever was being provided for the children, and from that point of view alone it seems that the scheme must break down; and from the accounts he received from the hospitals it was already breaking down. The vital nature of this question of transportation and the necessity of having places to treat the children in close proximity to the schools had been brought out by the subcommittee of the County Council eighteen months ago, so there was no excuse for pushing on with a scheme founded on such erroneous principles. An efficient scheme must provide for the work being carried on in centres convenient for the schools providing the children. The last point in this matter of inadequacy to which he wished to refer was the dental question brought by the Association before Dr. Newman. The medical profession was more anxious on this question than any other; for, with regard to the matter of the physical deterioration of the nation it was perfectly well known that the condition of the children's teeth was perhaps the most elementary fact to be attended. Nevertheless the scheme of the County Council made no provision whatever for dealing with the teeth. The reason why it did not was that it had been informed by the dental profession that the only way of dealing with the children's teeth satisfactorily would be by having suitable centres or clinics in the districts; the hospitals could not do it. The dental hospitals acted in a much more public spirited manner than some of the general hospitals because they refused to accept the proposal to do the work for the County Council. He considered that this last point was one of the most important reasons for driving home the necessity for the British Medical Association's scheme being carried out in preference to that of the London County Council. With regard to the second resolution the British Medical Association had taken steps to obtain the opinion of the profession, and this took time. Therefore, at the Representative Meeting at Belfast last year all that could be done was to lay down certain general principles. Those principles were agreed to, and were contained in the memorandum before the meeting. The memorandum was only a draft, but it was allowed to be put before the meeting in consequence of the great urgency of the matter. The document must not be regarded as absolutely final, though it might be taken as practically final. The general resolutions come to at Belfast laid down the principle that State medical treatment of a community ought not to be done through charitable institutions, and went on to suggest ways in which medical service could be carried out with profit to the community and in the interests of the profession. The document indicated model schemes by which the school treatment of children might be managed, giving details of three schemes actually being organized in Norwood, Wandsworth, and Hampstead. The whole principle dealing with this question as it presented itself to the British Medical Association at the present time was thus before the meeting. The memorandum applied to the whole country, but as regards London the Divisions of the Association were holding meetings to consider the subject. The hope was that the whole metropolis would be treated on the same footing; that the present County Council scheme would be given up at the end of the present provisional year, and that there would be established a proper body for the school medical service in each Division of the metropolis. By doing this the children would receive prompt and proper treatment. In conclusion, he submitted that at any rate the scheme of the draft memorandum was a concrete scheme, having none of the defects of the County Council scheme, which he considered to be wholly inadequate. He begged to move the adoption of the resolutions.

Dr. FINUCANE, in seconding the resolutions, said that in regard to the action of those medical men who differed from the views which had been put forward, and who had joined themselves, at any rate up to the present, against the settled policy of the British Medical Association, he did not wish to use any harsh words or unduly to criticize their action, but he awaited with some curiosity and interest some explanation of how it was that they found themselves able to adopt the course they had, and to differ from the Association, which looked after all the political, social, and economic questions connected with the work of the profession. If those medical men had followed the question of the medical inspection and treatment of school children, they could not, if they

had been true to the principles of the profession, have sanctioned for one moment the action which certain hospitals had taken. He concluded by expressing the hope that the Association would be able to put forward a concrete scheme for dealing thoroughly next year with this great national question.

The CHAIRMAN then invited discussion upon the resolutions.

Mr. STANLEY BOYD, Chairman of the Committee appointed to negotiate on behalf of certain London hospitals with the Education Committee of the London County Council, said that when the London hospitals were approached by the London County Council it was not understood that all school children should be seen at the hospitals, and he thought that to describe the scheme as inadequate was not quite fair. With regard to teeth, that was a matter still under consideration, and he did not think the Conference was in possession of the London County Council's full scheme. At a meeting of representatives of ten London hospitals the view of the British Medical Association that school clinics ought to be attended by medical practitioners in the neighbourhood was strongly urged, but the interests of the hospitals had also to be considered. Experience had shown that the expectation of a large increase of child patients in consequence of the medical officers' reports was not fulfilled, and in the largest London hospital, after a slight increase, the figures had sunk to the normal. The question was, What would happen if the hospitals declined to see school children? He thought that if they were taken away there would be no child patients left for the hospitals. and there would be no material for the student, and no experience to be gained in the treatment of eyes, nose, ears, or anything else. More than that, the establishment of school clinics for the treatment of children would inevitably result in beds being established, and the school clinic would grow into a children's hospital, and general hospitals would to a very large extent be robbed of material for instruction in children's diseases. Under rules which had been drawn up the London County Council investigated the financial position of the children's parents, and at the London and Charing Cross Hospitals, at least, no child was dealt with unless the case had passed the almoner. With regard to the payment by the London County Council to the hospital for treatment of cases, it had been agreed that anything over and above out-of-pocket expenses should go to the profession. It was urged that the London hospitals, massed in the centre of London, could not possibly deal with all the children, but it was only right by reason of the advantage to the students and lack of disadvantage to the patient, that they should have their share, and finally, although it was not a great argument, it would be a relief to the rates.

Mr. HARRISON CRIPPS said such a difficult question as that before the meeting could only be dealt with by looking at it from different aspects. He considered it a gross abuse for the London County Council to send school children to the public hospitals. The object of hospitals was not to give indiscriminate charity to a large population perfectly well able to pay for its own medical attendance. He deprecated the overcrowding of the out-patient department, which meant that the patients were not attended to properly. Hospitals should be looked upon as institutions for affording medical and surgical relief to people which they could not obtain elsewhere, at the same time maintaining moderate out-patient departments to educate students and provide a future generation of practitioners. He maintained that the great majority of parents in London, including the better class of working man and artisan, were able to pay for medical treatment of their children, and there was no excuse for the children being sent to the hospitals at all. He did not agree with the previous speaker that school clinics would develop into children's hospitals, and pointed out that whilst the medical practitioner did not receive remuneration for seeing children in the general hospitals, he would be properly paid for seeing them in the school clinics. The medical profession was always willing to give its services to those whose illnesses urgently demanded it, and who could not afford to pay, but medical men should not be called upon to give their services when the services ought to be paid for. Therefore he most earnestly objected to the scheme of the London County Council which proposed that children should be sent to the public hospitals of the country and charitable institutions.

Dr. ARCHER disputed the statement that all cases of school children going to the public hospitals were investigated by the hospital authorities or the County Council as to their fitness for treatment or as to their financial position. The procedure the County Council adopted with regard to these children was that the medical officer gave a card to the child to take to its parents, saying: "Your child is suffering from a disease of the throat—namely, adenoid; and you are forthwith to take it to a medical practitioner for treatment." If the parents took no notice of that, in the course of a week or two they receive another card: "Inasmuch as you are obviously unable to pay for the treatment of your child, an appointment has been made for you to take it at — o'clock on Tuesday afternoon to the Charing Cross Hospital, where treatment will be given." If the parents took no notice of that, a week or two later they received another card: "Finding that you have taken no notice of the previous card sent to you in regard to your child, another appointment has been made for you to take your child on Wednesday afternoon to the Charing Cross Hospital for treatment, and if you fail in so doing you will be proceeded against under the Cruelty to Children Act for causing unnecessary trouble to your child." He had had more than one case of that description brought to him as a private medical practitioner. The parent had said: "What have we to do, sir? We do not want to take the child to the hospital —we would rather bring it to you; but they are going to take us to the Old Bailey." No investigation had taken place in regard to the fitness of such children for hospital treatment, and the parent had not even been asked. The parents were unwilling to take their children to the hospital unless they thought it absolutely necessary, but if they did not they were to be proceeded against.

Dr. LAURISTON SHAW thought most of those who differed most strongly from their colleagues in the past would be very glad for the explanation of the position that the hospitals had taken up on this question. They ought all to agree with Mr. Stanley Boyd that at the time when these hospitals were negotiating with the London County Council very little arrangement had been made or seemed likely to be made for the efficient treatment of these children in any other manner—that was to say, the general practitioner had not aroused himself, and had not recognized his responsibility in the matter. From that point of view there was much to be said for the hospitals, because, as a temporary measure it was perhaps desirable that they should step into the breach; but he hoped that they would recognize now that that position of things had entirely passed away. He desired to bring home to the staffs of the hospitals that seeing these children was a real abuse of charity; and that the first resolution was not a mere empty formula.

Dr. MICHAEL said that it might be putting the matter on a low basis, but he held that this was to the general practitioner, after all, a matter of sheer bread and butter: it meant his absolute existence. If the medical attendance on these children was taken away from the general practitioner, it seemed to him that the private practitioner's practice would be very badly cut into, and that nearly one-half of his practice would be taken away. Therefore he felt that there was no general practitioner in England who would not oppose to the best of his ability the treatment of these children by any of the large hospitals. There was already a suitable centre in many of the districts in London to which those children could be sent for treatment. There were in London to his knowledge thirty, if not more, well-known

dispensaries, many of them formed on a provident basis, and to them were attached the local medical practitioners, mostly those best known in the neighbourhood of the dispensary. These places were more suitable for the reception of such work as had been defined. Nearly every member of the medical profession could be attached to these dispensaries, and they could treat the eye, ear, nose, throat, or ringworm, as the case might be, and there would be no necessity for these children to go to the hospitals.

Dr. SWAYNE said, in reference to Mr. Stanley Boyd's remarks, that under the Norwood scheme there would be two beds for patients who were ill after an anaesthetic, but the clinic could not develop into a children's hospital because the cases were selected before they came there, and there would be a rigid rule to prevent any other cases being attended to at the clinic.

Dr. SIDNEY PHILLIPS maintained that the meeting was not a conference between the Branch and the medical staffs of metropolitan hospitals, because in his opinion before a conference could be held between two parties it was necessary for both to confer. As it was, he could not discover that any overtures had been made to the London hospitals. It might be that some of the members of the staffs were also members of the Association, and were present in that capacity, but they did not attend as delegates. He therefore considered that the heading of the circular was a misrepresentation, and entirely misleading.

Dr. FINUCANE, as a point of order, asked whether that statement was correct.

The CHAIRMAN ruled that the speaker was in order, as it was a matter of opinion.

Dr. PHILLIPS, continuing, said that the London County Council issued two reports—one a Majority Report signed by 11 members and one a Minority Report signed by 9 members, and that it was the merest chance that the Majority Report was not the Minority Report, and vice versa, as one member's motor car broke down and another member got tired and went home. He asked his hearers to wait a little before utterly condemning the London County Council scheme, which, after all, had only just started operation, and was only an experiment for a year. He asked why, because a child went to the board school, and was sent to the hospital after being examined as to means by an almoner, the hospital should refuse to treat him, when if a child of a needy person went in the ordinary way he would be treated without question. The diatribes he had heard were outside the question. ("No, no.") He asked if his interrupters denied that the cases had to be submitted to the almoner. (Cries of "Yes," and "The almoner is no good.") The fact that the almoner might be no good had nothing to do with the point. If the almoner did not act properly, that was a matter to be inquired into; but it was quite a different thing to say because some part of the machinery did not work properly that they were not to go to the almoner at all. Sir Victor Horsley had argued that the proposals were inadequate because of the large number of children to be treated, but he did not say that a large proportion of those children were children of persons who could afford to pay for them, and he felt, therefore, that he could not accept Sir Victor's reasons for saying that the hospitals would be inadequate; he believed they would be found perfectly adequate. (A voice: "The principle is wrong.") It was not a matter of principle. It had been shown by the figures brought forward that the hospitals could not receive the children. It was said that this was an abuse of charitable institutions. Surely that was a matter of opinion, and it was for the people who supplied the money to say how it should be applied. A woman might bring a child to the hospital and say: "This child has adenoids." She would be asked, "How do you know?" and she would reply, "Because he snores." Then she would be told, "Very well, we will treat him." Noticing that she had another child they would ask her why she had brought him, and she would reply, "Because the school medical officer told me to." Thereupon they would immediately tell her to take it away on the ground that it was not eligible for treatment. [At this point there was a considerable amount of interruption, and the speaker was understood to say that the interrupters were very like antivivisectionists in that they dared to abuse hospitals and charge them with diversion of funds, because they could not bring a slander action; if they dared to do that with an individual they would instantly have an action brought against them. (Cries of "No, no.")] It was quite a new principle to say that people who supplied the money were not entitled to say what should be done with it.

Dr. ARCHER pointed out that the words "diversion of public funds" did not appear in the resolutions.

Dr. SIDNEY PHILLIPS replied that he was reading from a printed paper sent out by the Branch. He sympathized with the general practitioner, but this money did not come out of the general practitioner's pocket.

A VOICE: We are all ratepayers.

Dr. SIDNEY PHILLIPS said that the money paid over to the hospitals would not otherwise go to the general practitioner. The general practitioner did not, as a rule, undertake these cases. (Cries of "Oh!") That, at any rate, was his belief. He would conclude by saying that in his opinion the resolutions were entirely premature, and he disagreed with the suggestion that the arrangement made by the London County Council "involved an abuse."

Dr. R. M. BEATON desired to move an amendment to the resolution, which he said, though verbal, was of importance. He suggested the omission from the first resolution of the words "for this national purpose," because they were dealing with a London matter and not a national one. He also suggested that at the end of the resolution, after the words "medical institutions," the words "and unfairness to the medical profession" should be added. That was their opinion, and he saw no reason why they should not say so. He was a member of the subcommittee of which Dr. Phillips and Sir Victor Horsley were members; he had the advantage also of being a member of the London County Council, and he watched the matter right through the Education Committee, of which he was also a member. Mr. Stanley Boyd and Dr. Phillips had done their best with a very bad case. It was stated that south of St. Thomas's and Guy's Hospitals there was no other hospital until Woolwich was reached, and that one-third of the children of London were not provided with a hospital. When the distance the children had to go, the time they had to wait, and the fact that they had to be accompanied by their father, mother, sister, or some one at great expense to themselves and loss of work, were taken into consideration, it would be seen that the whole thing was inadequate; but the medical profession would not be able to do much unless it made up its mind to be united. It had been felt strongly that if the children of London were to be looked after, the medical men in each neighbourhood should look after them. In Hampstead half a dozen men had suggested that they would see the children of Hampstead, and they had taken a house and fitted it up, and children were going there; and he thought that what had been done there could be done in other places, and that if medical men made their voices heard they would be able to have school clinics attended by a medical practitioner.

Dr. BECKETT-OVERY, in seconding the amendment, expressed the opinion that Dr. Phillips was under a misapprehension as to the procedure adopted by the London County Council. He could vouch for two cases which showed that there was no attempt to exclude any child, no matter what the parents were earning; and he had the parents' permission to give the details. It was beyond question that the hospitals were inadequate to give proper treatment. The London County Council looked upon the matter as a business affair, and he assured the Conference that the County Council were going to take advantage of the far-reaching powers of the Act to exact 4s. a child from all parents earning over 27s. a week. There was

no charity so far as the London County Council were concerned; it was merely using the hospitals as a convenience for getting the children treated at 4s. a head.

Dr. SIDNEY PHILLIPS interjected the remark that he had known cases rejected by the hospital—a course to which the County Council agreed.

Continuing, Dr. BECKETT-OVERY said that care committees in many cases were forestalling the issue of the County Council's certificate to the parent to take the child to obtain medical relief, and were sending the children off to the hospital in the ordinary way before obtaining a certificate. That very grave abuse existed was proved by the cases he had mentioned, in which the parents were quite willing to pay a good fee.

The CHAIRMAN announced that the mover and seconder of the resolution were willing to accept the amendment before the meeting.

Dr. SPRIGGS, speaking with reference to St. George's Hospital, said that the governors of the hospital laid down a rule that the hospital should not make a profit on the transaction and that the subscribers should not support it. A calculation had been made as to what it would cost the hospital, based on the cost of the out-patient department, and the board said if that sum were received they were prepared to grant facilities. It was true that the buildings of the hospital were used, yet that was a saving for the ratepayers, and with the payment agreed on, involved no abuse of the charity. It had been urged upon the governors of the hospital by the staff that any movement such as was suggested must not exploit the medical profession. It might exploit the medical profession if the services of the consulting staff were used to treat children when the staff were not paid, and it might harm the medical profession if children were treated who would otherwise have paid fees to their own practitioners; but he could assure those present that no more strenuous words had been used that afternoon than had been used in the committee rooms where he had been to point out that such a thing must not be allowed to happen. The particular machinery proposed at St. George's was that the London County Council should first make sure that the children could not pay, and, secondly, the hospital itself refuse to agree to treat the children except on the condition that the hospital's own almoner had a right to investigate the cases. If any injustice were done, he could assure the meeting that the most careful consideration would be given to the matter by the committee of the hospital. The hospital had formed the view that treating children for ringworm, and estimating refraction, and doing operations for tonsils and adenoids for children who had passed the double test would not deprive medical practitioners of income, the more so when it was remembered that such children were those who would have attended the hospital in the ordinary course. The Hospital Board had discussed the amount of remuneration to be paid, and had taken the amount suggested by the British Medical Association. Further, general practitioners were not deprived of these salaries, for the staff of St. George's had not accepted the appointments, which had been filled in almost every case by general practitioners in the neighbourhood, who had previously given their services to the poor as clinical assistants. He thought that other arrangements should be made in districts distant from hospitals, but believed that at St. George's neither the subscribers, the profession at large, nor the general practitioner, had been exploited.

Dr. JOSIAH OLDFIELD desired to put three points. First, that the hospitals should always deal with voluntary patients only. The hospitals were for the poor, but only for the voluntary poor. The moment the State compelled a patient to be treated that patient should not be treated by a hospital. Secondly, the moment the State compelled a patient to be treated the State should pay for the treatment of that patient, and immediately the State paid for the treatment of a patient the State should pay the local practitioner. Thirdly, the only person to decide whether a child was suitable for hospital treatment or not should be the local medical practitioner, and the moment the State decided to pay the fee, whatever it be, it should be paid to the local practitioner. If he decided that the case was one for hospital treatment, then, immediately the child went there, it should not be paid for by the State; and if local school clinics be established, they should be open to all members of the medical profession, and not only to a few private practitioners.

Sir VICTOR HORSLEY said he did not think any answer was required from him to the various points raised.

Dr. SPRIGGS suggested that the first resolution should be taken in two parts. He would vote for it up to the words "wholly inadequate for this national purpose," but the latter part he must vote against.

The CHAIRMAN declined to accept the suggestion.

The first resolution, as amended, was put and carried, three voting against. The second resolution was carried *nem. con.*

The proceedings then terminated.

CENTRAL MIDWIVES BOARD.

A SPECIAL meeting of the Central Midwives Board was held at Caxton House, Westminster, on April 26th, with Dr. F. H. CHAMPNEYS in the chair, at which the bill to amend the Midwives Act, 1902, was considered. (The text of the bill was published in the SUPPLEMENT of April 9th, 1910, p. 160.)

The provisions as to the reconstitution of the Central Midwives Board and as to the payment of fees to medical practitioners called in on the advice of midwives by Boards of Guardians were considered, and the discussion adjourned.

Hospitals and Asylums.

MEDICAL INSPECTION OF CHILDREN IN ORPHANAGES, INSTITUTIONS FOR THE BLIND, DEAF AND DUMB, ETC.

IN the autumn of 1909 the Executive Council of the National League for Physical Education and Improvement decided to institute an investigation into the medical inspection of inmates of orphanages, institutions for the blind, deaf and dumb, etc., as a fitting continuation of the work of its Special Committee on the Medical Inspection of School Children.

REPORT.

1. *Institutions.*

With this end in view question sheets were sent out on October 22nd, 1909, to 135 institutions, limiting the inquiry to those which, on the authority of the *Charities Register and Digest* for 1908, had accommodation for 40 children and upwards. This resulted in replies from 47 organizations, or 34.87 of the whole.

2. *Inmates.*

The total number of inmates covered by these answers was 13,652. One of the institutions contained no fewer than 4,100 children under one control, although cared for in 104 separate homes, in addition to a large number of children boarded out.

3. *Age on Entering.*

The children enter up to 10 years of age; in 5, or 10.6 per cent., of the institutions they are taken in up to 1 year old; in 8, or 17 per cent., from 1 to 4 years; in 28, or 59.5 per cent., from 5 to 7; and in 5, or 10.6 per cent., from 8 to ten years of age.

4. *Age on Leaving.*

They leave the institution in the large majority of cases (38, or 80.8 per cent.) between 14 and 16, although one emigrates them from 10 years upwards, another sends them out from 12, and yet another keeps them till 18. In 8 institutions the girls are kept on two or more years later than the boys.

5. *Medical Officers.*

Of the total number of institutions under review, 38, or 80.8 per cent., reported that they had salaried or honorary medical officers. It was also reported that in one institution with 80 inmates there was a resident medical officer, in four others he lived in an adjoining house, and three other medical officers were in telephonic communication with the home. In 7 institutions it was reported that the medical officer pays daily visits, in 7, once a week or oftener, and in 13 others he calls periodically. In the rest no reference is made to the frequency of visits of the medical officer.

6. *Education.*

The education is carried on entirely in the home in 35, or 74.4 per cent., of the institutions, and in 10, or 21.2 per cent., the inmates attend public elementary schools. Two of the larger homes educate partly in their own, partly in public schools.

7. *Provision for Treatment of Defects found in Elementary School Inspection.*

In the 10 institutions where the children go to public schools, defects discovered in the course of the ordinary school medical examination are, with one exception, treated by the medical officer attached to the institution, or at his discretion, in local hospitals or in the infirmary.

8. *Medical Inspection.*

Provision is made in 17 institutions, or 36.1 per cent., for periodical or frequent inspection, apart from medical treatment when ill, and the teeth are, as a rule, more frequently examined than other organs. Out of the 13,652 children with which this report deals, 9,869 are medically examined periodically. Examination on admission only is made in 8, or 17 per cent., of the homes, and 5 others repeat the examination at irregular intervals.

9. *Special Examinations.*

Medical examination with special reference to diseases of the eye, ear, nose, and throat, and teeth, on or before admission, is a rule in 41, or 87 2 per cent., of the homes, but is not insisted on in 4. In one institution it is only done if considered necessary. In 25, or 53.1 per cent., of the homes under review, such examination is continued at intervals during the children's stay. In 5 it is not done at all after admission, and in 11, or 23.4 per cent., the inmates are examined with reference to these organs whenever it is thought advisable. One institution has the teeth examined quarterly, another half-yearly, while in another case a dentist attends weekly.

10. *Records.*

Turning now to the question of annual entries in a special register, recording height, weight, chest measurement, acuity of sight and hearing, etc., we find that the weight is more frequently recorded than any other particular—in 23, or 48.9 per cent., instances. Height follows this very closely, being registered in 21, or 44.6 per cent., cases, while chest measurement is dealt with in 15, or 31.7 per cent., and sight and hearing in 14, or 29.7 per cent., cases. The medical officer's observations regarding the condition of the eyes, ears, nose and throat, and teeth, or any disease, deformities, or defects of general health are, however, recorded, at least annually, in 20, or 42.5 per cent. of the institutions.

11. *Treatment of Defects and Ailments.*—Any defects and ailments found at such examination are treated by the medical officers or consulting staff in 27, or 57.4 per cent., of the homes under review, and in 5 by specialists at the expense of the home. Minor operations are performed by the medical staff in 16, or 34 per cent.; in public hospitals in 11, or 23.4 per cent.; and in either one or the other in 7, or 14.8 per cent. of the homes; 15, or 31.9 per cent., reporting that they have their own infirmary or private hospital.

12. *General Remarks.*

Dealing now with general matters, we find that one institution has its own sanatorium for incipient consumptive cases, at which an open-air school is held. Another home has a country branch, where inmates who are out of sorts or recuperating after illness are sent. Five institutions lay stress on the physical training given, to which, in addition to good diet, fresh air, and careful attention, the good health prevalent among the inmates is largely ascribed.

13. *Conclusions and Recommendations.*

In view of the foregoing summary of the investigation carried on, the Council of the National League for Physical Education and Improvement regrets to find that, more particularly among the smaller institutions, inadequate provision is made for the regular and systematic medical inspection of the inmates of such homes, and recommends the more general use by medical officers of some form of register whereby the results of each inspection may be the more easily recorded and compared.

Naval and Military Appointments.

ROYAL NAVY MEDICAL SERVICE.

THE following appointments have been made at the Admiralty: Staff Surgeon R. S. OSBORNE to the *President*, additional, for the Royal Naval College, Greenwich, temporary, April 30th; Staff Surgeon A. W. B. LIVESAY, M.B., to the *Cornwall*, April 29th; Staff Surgeon E. T. P. EAMES to the *Devonshire*, May 10th; Staff Surgeon E. G. E. O'LEARY to the *Donegal*, and as Acting Interpreter in French, on recommissioning, May 17th; Staff Surgeon M. H. KNAPP and Surgeon J. J. H. ROONEY to the *Natal*, on recommissioning, May 10th; Surgeon G. R. MCCOWEN, M.B., to the *Donegal*, on recommissioning, May 17th; Staff Surgeon R. ST. G. S. BOND to the *Crescent*, temporarily, May 3rd.

ROYAL ARMY MEDICAL CORPS.

EXCHANGE.

he charge for inserting notices respecting Exchanges in the Army Medical Department is 3s. 6d., which should be forwarded in stamps or post office order with the notice, not later than Wednesday morning, in order to ensure insertion in the current issue.

FIELD OFFICER, who has been home one year, wishes to exchange to India.—Address Exile, care of Messrs. Holt and Co., 3, Whitehall Place, London.

ARMY MEDICAL SERVICE.

ROYAL ARMY MEDICAL CORPS.

LIEUTENANT-COLONEL C. L. JOSLING retires on retired pay, May 4th. He was appointed Surgeon, May 30th, 1885; Surgeon-Major, May 30th, 1897; and Lieutenant-Colonel, May 30th, 1905. He served in the operations against the Sofas, on the West Coast of Africa, in 1893-4 (mentioned in dispatches, medal with clasp); with the Ashanti expedition, 1895-6 (star); in the operations in Sierra Leone in 1898-9; and in the South African war in 1899-1902 as Principal Medical Officer, Rhodesian Field Force, and was present in operations in Rhodesia, the Transvaal, and Cape Colony (King's medal with two clasps).

The undermentioned Captains are promoted to be Majors, dated April 27th: G. J. S. ARCHER, M.B., ROBERT SELBY, M.B., S. O. HALL, A. E. WELD, J. S. GALLIE, F. J. C. HEFFERNAN, A. E. THORP, HENRY HERRICK, JAMES COWAN, M.B., A. R. O'FLAHERTY, H. B. G. WALTON, and E. P. HEWITT. Their previous commissions are dated: Lieutenant, July 27th, 1898; Captain, July 27th, 1901. Their war records include:—Major Archer—South African war, 1899-1902, including operations in Cape Colony and the Transvaal (Queen's medal with three clasps, King's medal with two clasps). Major Selby—South African war, 1899-1902, including the actions at Talana and Lombard's Kop, the defence of Ladysmith, and operations in the Transvaal (Queen's medal with three clasps, King's medal with two clasps). Major Weld—South African war, 1900-2, including the defence of Ladysmith (Queen's medal with clasp, King's medal with two clasps). Major Heffernan—West Africa, 1901 (medal with clasp). Major Herrick—South African war, 1902 (Queen's medal). Major O'Flaherty—Operations in Sierra Leone, 1898-9 (medal with clasp); South African war, 1902, including operations in Cape Colony (Queen's medal with three clasps). Major Walton—Operations in Sierra Leone, 1898-9 (medal with clasp); South African war in 1899-1902, including operations in the Orange Free State, Cape Colony, and the Transvaal, and actions at Vet River, Zand River, near Johannesburg, Pretoria, Diamond Hill, and Belfast (Queen's medal with five clasps, King's medal with two clasps). Major Hewitt—South African war, 1899-1901, including operations in the Transvaal, Orange River Colony, and Cape Colony, the relief of Kimberley, and actions at Paardeberg, Poplar Grove, Dreifontein, Karee Siding, Houtnek (Thoba Mountain), Vet River, Zand River, near Johannesburg, Pretoria, Diamond Hill, Wittebergen, and Colesberg (Queen's medal with five clasps).

Captain C. SCAIFE, M.D., Brigade Laboratory, Colaba, India, has been appointed Specialist in the Prevention of Diseases, from March 25th.

Colonel C. H. BURTCHAELL, M.B., Staff Officer to the Principal Medical Officer, Irish Command, is appointed Assistant Director-General of the Army Medical Service, from June 1st. Major C. DALTON succeeds Lieutenant-Colonel Burtchaell as Staff Officer.

SPECIAL RESERVE OF OFFICERS.

ROYAL ARMY MEDICAL CORPS.

THE following Lieutenants (on probation) are confirmed in that rank: GEORGE ROLLASON, W. H. L. MCCARTHY, M.B., IAN D. DICKSON, J. MCG. SCOTT, T. E. GUTHRIE, W. T. GRAHAM, C. S. SANDEMAN.

EDWARD T. HOLLAND to be Lieutenant (on probation), March 28th.

TERRITORIAL FORCE.

ROYAL ARMY MEDICAL CORPS.

Second West Riding Brigade.—Surgeon-Lieutenant-Colonel and Honorary Surgeon-Colonel ISAAC MOSSOP resigns his commission, January 16th; he retains his rank and uniform.

Second Wessex Field Ambulance.—Major A. B. SOLTAU, M.D., to be Lieutenant-Colonel, April 1st.

First Northern General Hospital.—FREDERICK C. PYBUS, M.B., F.R.C.S.Eng., to be Captain, whose services will be available on mobilization, March 17th.

For Attachment to Units other than Medical Units.—ROBERT N. WALLACE, M.B., to be Lieutenant, March 19th.

Attached to Units other than Medical Units.—Lieutenant JOHN MCWATT, M.B., resigns his commission, February 23rd. Captain T. E. FIELDING, M.B., Royal Army Medical Corps, to be an Adjutant of a School of Instruction, April 2nd.

Vital Statistics.

HEALTH OF ENGLISH TOWNS.

IN seventy-seven of the largest English towns, 8,388 births and 4,249 deaths were registered during the week ending Saturday last, April 30th. The annual rate of mortality in these towns, which had been 14.9, 15 0, and 13.7 in the three preceding weeks, declined again last week to 13.1 per 1,000. The rates in the several towns ranged from 5 9 in Leyton, 6.1 in Bury, 6.9 in Hornsey, 7.2 in Willesden and in Handsworth (Staffs), and 7.9 in Smethwick and in Aston Manor, to 18.5 in Tynemouth, 19.0 in Middlesbrough, 19.4 in Stockport, 20 6 in Oldham, 20 7 in Wallasey, 21.0 in Merthyr Tydfil, and 21.8 in Burnley. The death-rate from the principal infectious diseases averaged 1.1 per 1,000 in the seventy-seven large towns; in London the rate was equal to 1 0 per 1,000, while among the seventy-six other large towns the rates ranged upwards to 2 7 in Liverpool, 2.8 in Warrington, 3.1 in Devonport, 3.3 in East Ham, and 7.2 in Merthyr Tydfil. Measles caused a death-rate of 1 6 in Swansea, 1.8 in Bradford, 2.7 in East Ham, and 6.6 in Merthyr Tydfil; scarlet fever of 1.1 in St. Helens; diphtheria of 1.0 in Middlesbrough; whooping-cough of 1 8 in Oldham, 2 0 in Gateshead, 2 1 in Warrington, and 2.5 in Devonport; and diarrhoea of 1 4 in Smethwick. The mortality from enteric fever showed no marked excess in any of the large towns. One fatal case of small-pox belonging to Hull was registered during the week. The number of scarlet fever cases under treatment in the Metropolitan Asylums Hospitals and in the London Fever Hospital, which had been 1,554, 1,535, and 1,510, was 1,509 at the end of the week under notice; 192 new cases were admitted during the week, against 166, 197, and 196 in the three preceding weeks.

HEALTH OF SCOTTISH TOWNS.

DURING the week ending Saturday last, April 30th, 998 births and 630 deaths were registered in eight of the principal Scottish towns. The annual rate of mortality in these towns, which had been 18.2, 18 5, and 16.3 in the three preceding weeks, rose to 17.4 last week, and was 4.3 per 1,000 above the mean rate during the same period in the seventy-seven large English towns. Among these Scottish towns the death-rates ranged from 11.7 in Paisley and 13.2 in Aberdeen to 22.0 in Greenock and 32 8 in Dundee. The death-rates from the principal infectious diseases averaged 2.1 per 1,000, the highest rates being recorded in Greenock and in Dundee. The 280 deaths in Glasgow included 5 which were referred to measles, 3 to scarlet fever, 1 to diphtheria, 5 to whooping-cough, and 7 to diarrhoea. Thirty-two deaths from measles were recorded in Dundee, 3 in Paisley, and 3 in Greenock.

HEALTH OF IRISH TOWNS.

DURING the week ending Saturday, April 30th, 703 births and 485 deaths were registered in the twenty-two principal urban districts of Ireland, as against 643 births and 494 deaths in the preceding period. The annual death-rate in these districts, which had been 23.2, 23.2, and 22 4 per 1,000 in the three preceding weeks, fell to 22.0 per 1,000 in the week under notice, this figure being 8 9 per 1,000 higher than the mean annual death-rate in the seventy-seven English towns for the corresponding period. The figures in Dublin and Belfast were 23.9 and 23.1 respectively, those in other districts ranging from 4.8 in Sligo and 6.9 in Armagh to 29.5 in Kilkenny and 37.4 in Wexford, while Cork stood at 19 9, Londonderry at 20.4, Limerick at 19.1, and Waterford at 23.4. The zymotic death-rate in the twenty-two districts averaged 1.8 per 1,000, as against 1.9 per 1,000 in the preceding week.

Vacancies and Appointments.

This list of vacancies is compiled from our advertisement columns, where full particulars will be found. To ensure notice in this column, advertisements must be received not later than the first post on Wednesday morning.

VACANCIES.

BANBURY: HORTON INFIRMARY.—House-Surgeon. Salary, £80 per annum.

BATH: ROYAL MINERAL WATER HOSPITAL.—Resident Medical Officer. Salary, £100 per annum.

BIRMINGHAM GENERAL DISPENSARY.—(1) Resident Surgeon; salary, £170 per annum. (2) Temporary Resident Surgeon; salary, £4 4s. per week.

BIRMINGHAM AND MIDLAND EAR AND THROAT HOSPITAL.—House-Surgeon. Salary at the rate of £70 per annum.

BRIGHTON COUNTY BOROUGH ASYLUM, Haywards Heath.—First Assistant Medical Officer and Pathologist. Salary, £250 per annum, rising to £300.

BRIGHTON: SUSSEX COUNTY HOSPITAL.—Secretary. Salary, £250 per annum, and £100 allowance in lieu of apartments and board.

BRISTOL EYE HOSPITAL.—House-Surgeon. Salary, £80 per annum.

BRISTOL ROYAL INFIRMARY.—Honorary Medical Registrar.

BRIXTON DISPENSARY, Water Lane, S.W.—Resident Medical Officer. Salary, £150 per annum.

BURY INFIRMARY.—Junior House-Surgeon. Salary, £80 per annum, increasing to £90.

CANTERBURY: KENT AND CANTERBURY HOSPITAL.—Honorary Surgeon.

CHESTER: COUNTY ASYLUM.—Third Assistant Medical Officer. Salary, £160 per annum.

FLEETWOOD: ROSSALL SCHOOL.—Resident Medical Officer. Salary, £250 per annum, rising to £300.

GLOUCESTERSHIRE ROYAL INFIRMARY AND EYE INSTITUTION.—Assistant House-Surgeon. Salary at the rate of £80 per annum.

GORDON HOSPITAL FOR RECTAL DISEASES, Vauxhall Bridge Road, S.W.—House-Surgeon.

HALIFAX: ROYAL HALIFAX INFIRMARY.—Second House-Surgeon. Salary, £100 per annum.

ITALIAN HOSPITAL, Queen Square, W.C.—(1) Honorary Assistant Physician (out-patients); (2) Honorary Anaesthetist.

LANCASHIRE EDUCATION COMMITTEE.—Two School Medical Inspectors. Salaries, £250 per annum, increasing to £400.

LEICESTER POOR LAW INFIRMARY.—Second Assistant Medical Officer. Salary, £120 per annum.

LIVERPOOL STANLEY HOSPITAL.—Honorary Surgeon.

LONDON HOSPITAL, E.—Assistant Surgeon.

LONDON THROAT HOSPITAL, Great Portland Street, W.—House-Surgeon. Honorarium at the rate of £50 per annum.

MANCHESTER CORPORATION.—Female Medical Officer under Midwives Act. Salary, £250 per annum.

MANCHESTER VICTORIA MEMORIAL JEWISH HOSPITAL, Cheetham.—Resident Medical Officer (lady). Salary at the rate of £80 per annum.

MEDICAL GRADUATES' COLLEGE AND POLYCLINIC, Chenies Street, W.C.—Pathologist (resident). Remuneration, a proportion of the fees (guaranteed minimum, £120 per annum).

METROPOLITAN DISPENSARY, Fore Street, E.C.—Medical Officer. Salary, £175 per annum.

MILLER GENERAL HOSPITAL, Greenwich Road, S.E.—Honorary Physician.

MOUNT VERNON HOSPITAL FOR CONSUMPTION.—Clinical Assistants for the hospital at Hampstead, and out-patient department, Fitzroy Square, W.

NOTTINGHAM GENERAL HOSPITAL.—Locumtenent for three and a half months. Salary, £45.

PLYMOUTH: SOUTH DEVON AND EAST CORNWALL HOSPITAL.—(1) House-Surgeon. (2) House-Physician. Salary at the rate of £100 and £75 per annum respectively.

PUBLIC DISPENSARY, Drury Lane, W.C.—Resident Medical Officer. Salary, £105 per annum.

ROSS AND CROMARTY COUNTY COMMITTEE.—Medical Inspector of School Children. Salary, £250 per annum.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, W.C.—Hunterian Professors and Arris and Gale Lecturer.

SHEFFIELD ROYAL HOSPITAL.—Assistant House-Physician. Salary, £50.

SOUTHPORT INFIRMARY.—Junior House and Visiting Surgeon. Salary commencing at the rate of £70 per annum.

SOUTH SHIELDS: INGHAM INFIRMARY AND SOUTH SHIELDS AND WESTOE DISPENSARY.—Senior House-Surgeon (male). Salary, £100 per annum.

SOUTHWARK UNION INFIRMARY.—Assistant (male) Medical Officer. Salary, £100 per annum.

STAFFORD: STAFFORDSHIRE GENERAL INFIRMARY.—House-Surgeon. Salary, £100 per annum.

TAUNTON AND SOMERSET HOSPITAL.—Resident Assistant House-Surgeon. Salary at the rate of £50 per annum.

TYNEMOUTH VICTORIA JUBILEE INFIRMARY, North Shields.—House-Surgeon. Salary, £100 per annum.

WEST RIDING ASYLUM, Wadsley.—Fifth Assistant Medical Officer (male). Salary, £140 per annum, rising to £160.

WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.—House-Surgeon. Salary, £80 per annum.

CERTIFYING FACTORY SURGEONS.—The Chief Inspector of Factories announces vacancies at Elstree, co. Hertford, and West Huddersfield, co. York.

APPOINTMENTS.

BREBNER, C. S., M.D.Edin., D.P.H.Camb., Certifying Factory Surgeon for the Widnes District, co. Lancaster.

BURTON, W. R., L.R.C.P. and S.Irel., District Medical Officer of the Spalding Union.

CORKER, J., M.B., B.Ch., R.U.I., Assistant Medical Officer of the Walton Workhouse of the West Derby Union.

CURRIE, Oswald James, M.B.Lond., M.R.C.S.Eng., Honorary Visiting Surgeon to the Wynberg Hospital, Cape Town.

GILLESPIE, W. J., B.A.Lond., L.S.A., District Medical Officer of the Poplar Borough Parish.

HINCKS, T. E., M.B., Ch.B.Edin., District Medical Officer of the Hay Union.

HOWELL, H. T., M.R.C.S., L.R.C.P., Assistant Medical Officer, Fulham Parish Infirmary.

LANDER, H. W. G., M.B., C.M.Edin., District Medical Officer of the Bakewell Union.

MCCONNELL, A. J., M.B., B.S.Edin., Resident Assistant Medical Officer to the Toxteth Park Township Workhouse.

PARRY-EDWARDS, O. J., M.B., B.Ch.Dubl., Medical Officer, Bodedern District, and Public Vaccinator, and Medical Officer of the Valley Workhouse of the Holyhead Union.

ROWLETTE, Robert J., B.A., M.D.Dubl., Visiting Physician to Jervis Street Hospital, Dublin.

SCRASE, J. S., M.R.C.S., L.R.C.P.Lond., District Medical Officer of the Newton Abbot Union.

SHORNEY, Herbert Frank, M.D., F.R.C.S.Eng., Honorary Assistant Ophthalmic Surgeon to the Adelaide Hospital.

SOMERVILLE, H., M.R.C.S., L.R.C.P.Lond., District Medical Officer of the Bedford Union.

STIEBEL, C., M.B.Camb., Assistant Medical Officer to the St. Marylebone Parish Infirmary.

TONGE-SMITH, W., M.D.Aberd., D.P.H., District Medical Officer of the Pocklington Union.

TREVOR-ROPER, B. W. E., M.R.C.S., L.R.C.P.Lond., District Medical Officer of the Alnwick Union.

TUBBY, A. H., M.S., F.R.C.S., Honorary Consulting Surgeon to Christ's Hospital.

WAITE, J. T., L.R.C.P. and S.Edin., District Medical Officer of the West Ashford Union.

WALKER, G. L., L.S.A., District Medical Officer of the Pontefract Union.

EDINBURGH ROYAL INFIRMARY.—The following gentlemen have been appointed Clinical Assistants: L. F. Bianchi, F.R.C.S.E., to Dr. Norman Walker; M. C. R. Grahame, L.R.C.P.E., L.R.C.S.E., to Professor Caird; V. H. Gordon, M.B., Ch.B., to Mr. Hodsdon.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 6d., which sum should be forwarded in post-office orders or stamps with the notice not later than Wednesday morning, in order to ensure insertion in the current issue.

BIRTHS.

BRODRIBB.—On April 28th, the wife of Dr. Arthur W. Brodribb, of White Rock, Hastings, of a son.

DUNNETT.—On April 30th, 1910, at 7, Ascott Avenue, Ealing, Agnes Dunnett, M.B.Lond., wife of Lionel Francis Dunnett, of a son.

MORISON.—At 1, Claremont Place, Newcastle-upon-Tyne, on April 27th, the wife of Professor Rutherford Morison, of a son.

MARRIAGES.

CANE—TIMS.—On April 27th, at Great St. Mary's Church, Cambridge, by the Rev. Lestock de Brisay (cousin of the bride), assisted by the Rev. E. G. Swain, Vicar of Stanground, Peterborough (late Chaplain of King's College, Cambridge), and the Rev. H. D. de Brisay (great-uncle of the bride), and the Rev. A. H. F. Boughey, Vicar, Arthur Skelding Cane, B.A.Camb., Royal Army Medical Corps, second son of Dr. and Mrs. Cane, of Eastbourne, to Enid Frances Mary, only daughter of Dr. and Mrs. Marett Tims, of Brookside, Cambridge.

ELLIOT—REID.—On April 28th, at St. Luke's Pro-Cathedral, Brisbane, by Archdeacon Le Fanu, Henry P. Elliot, M.B., C.M.Edin., of St. George, Queensland, son of Robert John Elliot, of Bramfield, Godalming, to Elena, daughter of John Reid, of Binalong, New South Wales. (By cable.)

DEATH.

MORISON.—At 1, Claremont Place, Newcastle-upon-Tyne, on May 2nd, Lull, wife of Rutherford Morison.

RECENT PUBLICATIONS.

Records of Sport. Seventh edition. London: The Royal Insurance Company. (Pp. 197. Free on application.)

A volume of pocket size, containing a list of all "records" in every kind of sport up to the end of 1909 and the principal cricket fixtures for the current year. Brief summaries of the salient points of the history of each sport are included. A useful book for students of "form" and the smoking-room bookshelf.

PUBLISHERS' ANNOUNCEMENTS.

IN Mr. John Murray's list of forthcoming publications, dated April, is the *Prevention of Malaria*, by Professor Ronald Ross. The book, which is illustrated, contains a short history of paludism (malaria), a compendium of facts about the disease, its distribution, discussions on various points; details, descriptions, and comparisons of the various antipaludic measures; a discussion of the cost; the antipaludic strategy and State policy; accounts of work done in various parts of the world and its results, and condensed accounts of the parasites, the

mosquitos, and the necessary technique. Mr. Murray will also issue a book by the same author, entitled *Philosophies*, which is described as a series of verses written in India between 1881 and 1889, mostly in connexion with the author's researches on paludism.

DIARY FOR THE WEEK.

MONDAY.

MEDICAL SOCIETY OF LONDON, 11, Chandos Street, Cavendish Square, W.—8 p.m., Annual Meeting and Election of Officers. 8.30 p.m., Tropical Diseases (Epidiascopic). Demonstrations:—(1) Sir Patrick Manson: Malaria. (2) Dr. F. M. Sandwith: *Ankylostomum Duodenale* and Entrance of the Larvae into the Human Body. (3) Dr. Carnegie Brown: Tropical Dysentery. (4) Dr. A. W. G. Bagshawe: Sleeping Sickness.

TUESDAY.

ROYAL SOCIETY OF MEDICINE:
SURGICAL SECTION, at the Botanical Theatre, University College, W.C., 5 p.m.—Discussion on The Present Position of the Treatment of Syphilis; to be opened by Mr. Ernest Lane.

WEDNESDAY.

UNITED SERVICES MEDICAL SOCIETY, Royal Army Medical College, S.W., 4.30 p.m.—Clinical Demonstrations.

THURSDAY.

ROYAL SOCIETY OF MEDICINE:
OBSTETRICAL AND GYNAECOLOGICAL SECTION, 15, Cavendish Square, W., 7.45 p.m.—Papers:—(1) Dr. F. J. McCann: Caesarean Section in the Treatment of Eclampsia Gravidarum. (2) Dr. A. J. Wallace: The Life-history of Fibromyomata of the Uterus.

FRIDAY.

ROYAL SOCIETY OF MEDICINE:
CLINICAL SECTION, 15, Cavendish Square, 8.30 p.m.—(1) Demonstrations:—Dr. Henry Head: Clinical Methods for Testing Sensations. (2) Cases and Specimens.

POST-GRADUATE COURSES AND LECTURES.

CENTRAL LONDON THROAT AND EAR HOSPITAL, Gray's Inn Road, W.C., 3.45 p.m.—Lecture: Tracheoscopy, etc.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton, S.W.—Wednesday, 4 p.m., Bronchiectasis.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—Thursday, 4 p.m., Fractures.

LONDON SCHOOL OF CLINICAL MEDICINE, Seamen's Hospital, Greenwich.—Daily arrangements: Out-patient Demonstration, 10 a.m.; Medical and Surgical Clinics, 2.15 p.m. and 3.15 p.m. respectively; Operations, 2 p.m. Special Clinics: Ear and Throat at noon and 4 p.m., Monday, and noon, Thursday; Skin, at noon and 4 p.m., Thursday, and noon, Friday; Eye, 11 a.m., Wednesday and Saturday; Radiography, 4 p.m., Thursday. Special Lectures: Monday, 4 p.m., Nasal Obstruction; Wednesday, 2.15 p.m., Empyema; Thursday, 4 p.m., Some Aspects of Rheumatism in Early Life.

MEDICAL GRADUATES' COLLEGE AND POLYCLINIC, 22, Chenies Street, W.C.—The following clinical demonstrations have been arranged for next week, at 4 p.m. each day: Monday, Skin; Tuesday, Medical; Wednesday, Surgical; Thursday, Medical; Friday, Ear, Nose, and Throat. Lectures, at 5.15 p.m. each day, will be given as follow: Monday, Some Common Difficulties in Forceps Delivery; Tuesday, Suggestion, Hypnotism, and Telepathy; Wednesday, Injuries of the Heart; Thursday, Internal Derangements of the Knee-joint.

NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC, Queen Square, W.C.—Tuesday, 3.30 p.m., Functional Localization in the Brain; Friday, 3.30 p.m., Tabes Dorsalis.

WEST LONDON POST-GRADUATE COLLEGE, Hammersmith.—Daily arrangements: Medical and Surgical Clinics, 2 p.m.; Monday, Surgical Registrar, 10 a.m.; Pathology, 12 noon; Eye, 2 p.m. Tuesday, Gynaecology, 10 a.m.; Throat, Nose, and Ear, 2 p.m.; Skin, 2 p.m. Wednesday, Diseases of Children, 10 a.m.; Throat and Nose Operations, Practical Medicine, 12.15 p.m.; Eye, 2 p.m.; Gynaecology, 2 p.m. Thursday, Surgical Registrar, 10 a.m.; Eye, 2 p.m.; Orthopaedics, 2 p.m. Friday, Medical Registrar, 10 a.m.; Gynaecological Operations, 10 a.m.; Throat, Nose, and Ear, 2 p.m.; Skin, 2 p.m. Saturday, Diseases of Children, 10 a.m.; Eye, 10 a.m. Lectures: Monday, 5 p.m., Throat, Nose, Ear; Tuesday, 5 p.m., Acute Rheumatism; Wednesday, 5 p.m., Practical Medicine; Thursday, 5 p.m., Throat, Nose, Ear; Friday, 5 p.m., Cases of Skin Disease.

CALENDAR OF THE ASSOCIATION.

Date.	Meetings to be Held.
MAY.	
8 Sunday ..	
9 MONDAY ..	
10 TUESDAY ..	WALTHAMSTOW DIVISION, *Metropolitan Counties Branch*, General Meeting of Practitioners, Lecture Hall, Wesleyan Church School, James Lane, High Road, Leyton, 4 p.m.
11 WEDNESDAY	
12 THURSDAY ..	ROCHDALE DIVISION, *Lancashire and Cheshire Branch*, Joint Meeting with Rochdale and District Medical Society, Wellington Hotel, Drake Street, Rochdale, 8.30 p.m. BROMLEY DIVISION: *South-Eastern Branch*, Bell Hotel, Bromley, 8.30 p.m
13 FRIDAY ..	
14 SATURDAY ..	BOURNEMOUTH DIVISION, *Dorset and West Hants Branch*, Annual Meeting.
15 Sunday ..	
16 MONDAY ..	
17 TUESDAY ..	
18 WEDNESDAY	DORSET AND WEST HANTS BRANCH, Spring Meeting, Hotel Mont Doré, Bournemouth.
19 THURSDAY ..	LONDON: Conference between Representatives of the Association and Representatives of British Pharmaceutical Conference, 3 p.m. Preliminary Conference of British Medical Association Representatives, 2 p.m. LONDON: Metropolitan Counties Branch Council, 4.30 p.m. GLOUCESTERSHIRE BRANCH, Annual Meeting, Stroud. LINCOLN DIVISION, *Midland Branch*, Annual Meeting, Guildhall, Lincoln, 3.30 p.m.

Date.	Meetings to be Held.
MAY *(continued)*.	
20 FRIDAY ..	BATH DIVISION, *Bath and Bristol Branch*, Annual Meeting Royal United Hospital, Bath, 5.30 p.m.
21 SATURDAY ..	
22 Sunday ..	
23 MONDAY ..	BRISTOL DIVISION, *Bath and Bristol Branch*, Annual Meeting, Medical Library, University College, Bristol, 5.30 p.m.
24 TUESDAY ..	
25 WEDNESDAY	BATH AND BRISTOL BRANCH, Annual Meeting, Bath. CARDIFF DIVISION, *South Wales and Monmouthshire Branch*, Annual Meeting, Cardiff. RICHMOND DIVISION, *Metropolitan Counties Branch*, Annual Meeting, Royal Hospital Richmond, 8.30 p.m.
26 THURSDAY ..	
27 FRIDAY ..	LONDON: Conference between Special Poor Law Reform Committee and Contract Practice Subcommittee, 2 p.m. CITY DIVISION, *Metropolitan Counties Branch*, Annual Meeting, Hackney Town Hall, 4 p.m. FURNESS DIVISION, *North Lancashire and South Westmorland Branch*, Annual Meeting, Masonic Club, Barrow, 3.15 p.m. HAMPSTEAD DIVISION, *Metropolitan Counties Branch*, 4.30 p.m. TOTTENHAM DIVISION, *Metropolitan Counties Branch*, Annual Meeting, Tottenham Hospital, 4.30 p.m.
28 SATURDAY ..	

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